

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

ADDRESS (number and street) 320 FIRST STREET SE  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20003

2. **FEC IDENTIFICATION NUMBER** C00075820  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 05 01 2006 through 05 31 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CHRISTOPHER J. WARD

Signature of Treasurer Electronically Filed by CHRISTOPHER J. WARD Date 06 20 2006

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  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		19560056.53
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	22778635.01									
(c) Total Receipts (from Line 19) .....	5775230.75	28294388.99								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	28553865.76	47854445.52								
7. Total Disbursements (from Line 31) .....	6590730.84	25891310.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21963134.92	21963134.92								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2987438.98	13521107.40
(i) Itemized (use Schedule A) .....	1751166.77	9675248.59
(ii) Unitemized .....	4738605.75	23196355.99
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	1036625.00	5096325.00
(c) Other Political Committees (such as PACs) .....	5775230.75	28292680.99
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	1708.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5775230.75	28294388.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5775230.75	28294388.99

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	3667044.97	20717096.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3667044.97	20717096.72
22. Transfers to Affiliated/Other Party Committees.....	100000.00	179000.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	19654.56	71257.05
24. Independent Expenditure (use Schedule E) .....	2708956.31	4710901.83
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	74925.00	74925.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	15150.00	108130.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	20150.00	113130.00
29. Other Disbursements.....	0.00	25000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6590730.84	25891310.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	6590730.84	25891310.60

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	5775230.75	28292680.99
34. Total Contribution Refunds (from Line 28(d)) .....	20150.00	113130.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5755080.75	28179550.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3667044.97	20717096.72
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	1708.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3667044.97	20715388.72

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Orlando E. Panfile</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 2331 Pebble Creek Dr		<b>Transaction ID: FF060502.0980044</b>	
City State Zip Code Alton IL 62002-5635	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Maxine Palmer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 19855 SW Touchmark Way Unit 104		<b>Transaction ID: FF060502.0980050</b>	
City State Zip Code Bend OR 97702-1953	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. David E. Frazier</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 307 Bob White St		<b>Transaction ID: FF060502.0980072</b>	
City State Zip Code Desoto TX 75115-5009	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Helen Neuendorfer

Mailing Address 1400 Waverly Rd  
Apt A110

City Gladwyne State PA Zip Code 19035-1255

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

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

**Transaction ID:** FF060502.1070033

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James A. March

Mailing Address PO Box 286

City Springport State MI Zip Code 49284-0286

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

Name of Employer Schunk Oilfield Serv Occupation Roustabout

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

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

**Transaction ID:** FF060502.1080072

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Loretta A. Hewitt

Mailing Address 757 Fort Ebey Rd

City Coupeville State WA Zip Code 98239-9779

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

**Transaction ID:** FF060502.1090053

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **150.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. C. W. Anderson

Mailing Address 103 NE 6th St

City Galva State IL Zip Code 61434-1137

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: FF060502.1110008

Amount of Each Receipt this Period  
26.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Robin Ritchie

Mailing Address 13-3533 Oneloa St

City Paha State HI Zip Code 96778-8203

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

Name of Employer Presidio I.s.d. Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: FF060502.1110026

Amount of Each Receipt this Period  
401.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Hazel Howard Le Valley

Mailing Address 35 Overland Route St

City Ardmore State OK Zip Code 73401-2915

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: FF060502.1110032

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>528.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard C. Pearcey

Mailing Address 2605 Anthony Dr

City State Zip Code  
Colmar PA 18915-9736

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: FF060502.1110036

Amount of Each Receipt this Period  
41.00

**B.** Full Name (Last, First, Middle Initial)  
Ft. Kenneth R. Stoker

Mailing Address 5114 Spring Blossom Ct

City State Zip Code  
Las Vegas NV 89118-1188

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: FF060502.1110053

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Maryann Marzocchi

Mailing Address 4297 Corporate Sq

City State Zip Code  
Naples FL 34104-4754

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: FF060502.1110056

Amount of Each Receipt this Period  
266.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>407.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Homer C. Jennings		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 620 Monterey Pl Apt 209		<b>Transaction ID:</b> FF060502.1120010
City State Zip Code Hutchinson KS 67502-2256	Amount of Each Receipt this Period 51.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Occupation Investments	Aggregate Year-to-Date ▼ 251.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Paul H. Story		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address PO Box 27910		<b>Transaction ID:</b> FF060502.1120017
City State Zip Code Panama City FL 32411-7910	Amount of Each Receipt this Period 101.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Occupation Small Business Owner	Aggregate Year-to-Date ▼ 201.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Edith Leonard		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 505 Muirfield Dr		<b>Transaction ID:</b> FF060502.1120021
City State Zip Code Lake Worth FL 33462-1207	Amount of Each Receipt this Period 51.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 251.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	203.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Daniel C. Gillespie		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 18 Pepper Bush Cir Apt 222		<b>Transaction ID:</b> FF060502.1120024
City Savannah State GA Zip Code 31411-3009	Amount of Each Receipt this Period 51.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 751.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Fred Kavil		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 1801 Solar Dr Ste 250		<b>Transaction ID:</b> FF060502.1120044
City Oxnard State CA Zip Code 93030-8297	Amount of Each Receipt this Period 226.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 226.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Marion S. Yerkes, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 3679 Blackfoot Ct SW		<b>Transaction ID:</b> FF060502.1120049
City Grandville State MI Zip Code 49418-1721	Amount of Each Receipt this Period 76.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 551.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	353.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Edward C. Miller</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address PO Box 5003		<b>Transaction ID: FF060502.1130005</b>	
City Janesville	State WI	Amount of Each Receipt this Period 101.00	
Zip Code 53547-5003		Transaction ID: FF060502.1130005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 101.00	
Name of Employer Mercy Health Systems	Occupation Doctor	Amount of Each Receipt this Period 101.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	Amount of Each Receipt this Period 101.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert C. Foersterling</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 2 Normton Dr		<b>Transaction ID: FF060502.1130013</b>	
City Saint Louis	State MO	Amount of Each Receipt this Period 51.00	
Zip Code 63124-2053		Transaction ID: FF060502.1130013	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 51.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 51.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	Amount of Each Receipt this Period 51.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. David Cuckler</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address PO Box 64547		<b>Transaction ID: FF060502.1130018</b>	
City Port Ludlow	State WA	Amount of Each Receipt this Period 102.00	
Zip Code 98365		Transaction ID: FF060502.1130018	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 102.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 102.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	Amount of Each Receipt this Period 102.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	254.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	254.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Sibyl S. Dever</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 5515 Dawning Creek Way		<b>Transaction ID: FF060502.1130042</b>	
City <b>Wilmington</b>	State <b>NC</b>	Zip Code <b>28409-2825</b>	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For:	Occupation <b>Homemaker</b>	Aggregate Year-to-Date ▼ 251.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Dr. Ejell Bushati</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1519 S Keene Rd		<b>Transaction ID: FF060502.1130045</b>	
City <b>Clearwater</b>	State <b>FL</b>	Zip Code <b>33756-2414</b>	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For:	Occupation <b>INFO REQUESTED</b>	Aggregate Year-to-Date ▼ 251.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Dale R. Emerson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 4417 Rose Ave		<b>Transaction ID: FF060502.1130062</b>	
City <b>Oakley</b>	State <b>CA</b>	Zip Code <b>94561-3503</b>	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For:	Occupation <b>Retired</b>	Aggregate Year-to-Date ▼ 1601.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	203.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Carol W. Lemmons

Mailing Address 302 Corrigan Ave

City State Zip Code  
Brownwood TX 76801-5001

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

Name of Employer Occupation  
Gator Pump Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1140034

Amount of Each Receipt this Period  
26.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Roberta L. Smith

Mailing Address 143 Sagamore Pkwy

City State Zip Code  
La Porte IN 46350-5284

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1140045

Amount of Each Receipt this Period  
151.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Karen H. Oertel

Mailing Address PO Box 145

City State Zip Code  
Chester MD 21619-0145

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

Name of Employer Occupation  
Harris Crab House Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1150001

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	278.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edward N. Henderson

Mailing Address 501 Southfield Rd

City State Zip Code  
Shreveport LA 71106-2215

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1151.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1150005

Amount of Each Receipt this Period  
301.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Raymon L. Garrett

Mailing Address 1310 Edgewood Ct

City State Zip Code  
Murfreesboro TN 37130-8110

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

Name of Employer Huddleson Steel Engineering Inc Occupation Land Surveyor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1150014

Amount of Each Receipt this Period  
41.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas K. Hostetler

Mailing Address 4432 Mount Vernon Pl

City State Zip Code  
Decatur IL 62521-8790

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1150015

Amount of Each Receipt this Period  
251.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>593.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Francis L. Scardino</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1008 Regency Cir		<b>Transaction ID: FF060502.1150018</b>	
City State Zip Code Blue Bell PA 19422-1037	Amount of Each Receipt this Period 251.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 501.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Ewel Grossberg</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1 Vista Del Golfo		<b>Transaction ID: FF060502.1150025</b>	
City State Zip Code Long Beach CA 90803-4166	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 351.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. David J. Marino</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 15 Rainbow Dr		<b>Transaction ID: FF060502.1150051</b>	
City State Zip Code Highland Mills NY 10930-2927	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 251.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	403.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kennard B. Hays

Mailing Address 2227 New Milford Rd

City State Zip Code  
Atwater OH 44201-9340

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1160021

Amount of Each Receipt this Period  
116.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Marsha T. Esswein

Mailing Address 153 Desert West Dr  
Apt 102C

City State Zip Code  
Pacific Plsds CA 90272-1367

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1160024

Amount of Each Receipt this Period  
201.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert S. McEldowney

Mailing Address 222 Aiokoa St

City State Zip Code  
Kailua HI 96734-1606

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

Name of Employer Applied Safety Management Llc Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1160040

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>418.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Martha E. Kourbage

Mailing Address 400 Bayside

City State Zip Code  
Breezy Point NY 11697-1009

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 411.00

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

Transaction ID: FF060502.1170005

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Lorraine P. Jones

Mailing Address 2322 W Emory Rd

City State Zip Code  
Powell TN 37849-3707

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

Name of Employer Occupation  
Info Requested Info Requested

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 201.00

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

Transaction ID: FF060502.1170006

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence F. Del Pizzo

Mailing Address 29 Tioga St

City State Zip Code  
Newton Falls OH 44444-1040

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

Name of Employer Occupation  
Kent State University Professor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 217.00

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

Transaction ID: FF060502.1170013

Amount of Each Receipt this Period  
52.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	254.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. James E. Pryce</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 44 Myrtle Bank Rd		<b>Transaction ID: FF060502.1170014</b>	
City State Zip Code Hilton Head SC 29926-1866	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Jean A. Murphy</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 9049		<b>Transaction ID: FF060502.1170028</b>	
City State Zip Code Kailua Kona HI 96745-9049	Amount of Each Receipt this Period 52.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Clark Realty Co.	Occupation V.P.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 552.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Nizam A. Fayad</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 6030 Knotty Post Ln		<b>Transaction ID: FF060502.1170038</b>	
City State Zip Code Spring TX 77373-7016	Amount of Each Receipt this Period 61.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Franklin Corporate Transportation Co.	Occupation Limo-driver		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 353.50		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	314.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. David N. Momah

Mailing Address 1100 Moccasin Trl

City Loganville State GA Zip Code 30052-4736

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

Name of Employer Self-employed Occupation Medical Doctor/physical Therapis

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1170043

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Keith J. Peetz

Mailing Address 2615 Oak Dr Unit 1

City Lakewood State CO Zip Code 80215-7168

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1170050

Amount of Each Receipt this Period  
102.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David E. Lindsey

Mailing Address 29000 US Highway 98 Suite A201

City Daphne State AL Zip Code 36526-7262

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

Name of Employer David E. Lindsey Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1180007

Amount of Each Receipt this Period  
151.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>354.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 21 / 2352</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Maj. Gen. Patrick J. Kelly

Mailing Address 602 Isham Cir

City Brielle State NJ Zip Code 08730-1612

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

**Transaction ID:** FF060502.1180045

Amount of Each Receipt this Period  
 101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Wayne Pope

Mailing Address 16 Highland Vw

City Irvine State CA Zip Code 92603-3705

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

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

**Transaction ID:** FF060502.1190001

Amount of Each Receipt this Period  
 1.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Maria Santiago

Mailing Address PO Box 3389

City Juncos State PR Zip Code 00777-6389

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

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

**Transaction ID:** FF060502.1190034

Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>103.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Donald W. Smiley</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 1757		<b>Transaction ID: FF060502.1190050</b>	
City Mammoth Lakes	State CA	Zip Code 93546-1757	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Doris M. Gaythwaite</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 105 Hermitage Rd		<b>Transaction ID: FF060502.1190071</b>	
City Williamsburg	State VA	Zip Code 23188-2551	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Leland C. Scheu</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 244 W 24th St		<b>Transaction ID: FF060502.1190083</b>	
City Upland	State CA	Zip Code 91784-1179	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Joy Mosley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 542		<b>Transaction ID:</b> FF060502.1200031	
City State Zip Code Butler AL 36904-0542	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mosley Body Shop	Occupation Sec		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Edward J. Nangle</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 70 Federal St Fl 5		<b>Transaction ID:</b> FF060502.1200070	
City State Zip Code Boston MA 02110-1906	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Nangle Financial Associates Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Jeffrey R. Bland</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 149 White Bell Cir		<b>Transaction ID:</b> FF060502.1200076	
City State Zip Code Wellsburg WV 26070-1248	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Denman Tire Corp	Occupation Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John E. Bryan		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 300 Valley St Ste 206		<b>Transaction ID:</b> FF060502.1210004	
City Sausalito	State CA	Amount of Each Receipt this Period 1.00	
Zip Code 94965-2480			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer John E. Bryan Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Bonnie W. Coon		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 291		<b>Transaction ID:</b> FF060502.1210008	
City Atmore	State AL	Amount of Each Receipt this Period 1.00	
Zip Code 36504-0291			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Diamond Gasoline	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Bonnie L. White Coon		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 291		<b>Transaction ID:</b> FF060502.1210009	
City Atmore	State AL	Amount of Each Receipt this Period 1.00	
Zip Code 36504-0291			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Emil H. Pawlik

Mailing Address 11 Avery Cir

City State Zip Code  
Jackson MS 39211-2403

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

Name of Employer Refused To Give Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1210042

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. George C. Barnes

Mailing Address 174 Pelican Loop

City State Zip Code  
Pittsburg CA 94565-2052

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

Name of Employer Guardian Realty Rimco Mortgage Co. Occupation  
Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1210046

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Noble Seigrist

Mailing Address 3505 N Ridge Dr

City State Zip Code  
Jacksonville AR 72076-4196

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

Name of Employer Seigrist Noble Roofing Occupation  
Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1220038

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Martha P. Giese

Mailing Address 20 Framingham Ln

City State Zip Code  
Pittsford NY 14534-1048

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1351.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1220040

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry T. Lee

Mailing Address 6073 W Clinton Ave

City State Zip Code  
Fresno CA 93722-9252

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

Name of Employer Ltl, LLC Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1220061

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Norman Brassler

Mailing Address PO Box 447

City State Zip Code  
Buck Hill Fls PA 18323-0447

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1220094

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard A. Laroche

Mailing Address 5830 W Gordonville Rd

City State Zip Code  
Shepherd MI 48883-9217

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

Name of Employer Occupation  
Finishing Touch Mobile Homes Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1001.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1230006

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jay T. Comeaux

Mailing Address 2211 Augusta Dr Apt 18

City State Zip Code  
Houston TX 77057-4771

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

Name of Employer Occupation  
Stanford Group Co. Exec Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1230084

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald L. Ragsdale

Mailing Address 4709 Colleyville Blvd Ste 550

City State Zip Code  
Colleyville TX 76034-3962

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

Name of Employer Occupation  
Omega Aerospace Suppliers Corp CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1230085

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Francis J. Blanchard, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address <b>1022A Council Dr</b>		<b>Transaction ID: FF060502.1240005</b>	
City <b>Alexandria</b>	State <b>LA</b>	Zip Code <b>71303-5756</b>	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Carthel O. Keathley</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address <b>5217 Broadway</b>		<b>Transaction ID: FF060502.1240015</b>	
City <b>Bronx</b>	State <b>NY</b>	Zip Code <b>10463-7636</b>	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Omark Ltd Inc	Occupation Florist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Craig G. Wilson</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address <b>PO Box 131685</b>		<b>Transaction ID: FF060502.1240030</b>	
City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77219-1685</b>	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Darwin L. Dunn		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 3		<b>Transaction ID:</b> FF060502.1240039	
City State Zip Code Savery WY 82332-0003	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dunn Trucking Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Bryan D. Oliveira		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 6706		<b>Transaction ID:</b> FF060502.1240085	
City State Zip Code Bend OR 97708-6706	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Synergy Global Transporta- tion	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Edward R. Broun		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 4777 E Galbraith Rd		<b>Transaction ID:</b> FF060502.1250059	
City State Zip Code Cincinnati OH 45236-2725	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Oncology Hematology Care, Inc	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Bassam N. Aldaia</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 660 92nd St		<b>Transaction ID: FF060502.1250063</b>	
City State Zip Code Brooklyn NY 11228-3621	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bassam Aldaia, Md Llp	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Thomas W. Hudson, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 12071 SE Prestwick Ter		<b>Transaction ID: FF060502.1260049</b>	
City State Zip Code Jupiter FL 33469-1748	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. John R. Crapster</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 342 Troopers Way		<b>Transaction ID: FF060502.1260063</b>	
City State Zip Code Salisbury MD 21804-2221	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Perdue Farms Inc	Occupation Poultry Industry		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Stella F. Zolna</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 3044 29th St Apt 3T		<b>Transaction ID: FF060502.1260067</b>	
City Astoria      State NY      Zip Code 11102-2523	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Frank H. Bynes, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 703 Noble Oaks Dr		<b>Transaction ID: FF060502.1260077</b>	
City Savannah      State GA      Zip Code 31406-2644	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Frank H. Bynes Jr. M.d. P.c.	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. R. T. Hardeman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 903 Robert E Lee Dr		<b>Transaction ID: FF060502.1260086</b>	
City Greenwood      State MS      Zip Code 38930-2434	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Farmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Augusto Navarrete</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 291 Lomita Ave		<b>Transaction ID: FF060502.1270010</b>	
City State Zip Code San Bruno CA 94066-5409	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer A Navarrete Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. M. T. Shimizu</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 2960E Pineview Dr		<b>Transaction ID: FF060502.1270019</b>	
City State Zip Code Salt Lake Cty UT 84121-3428	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Civil Engr-property Mngr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. David B. Williamson</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 9510 Tioga Dr Ste 102		<b>Transaction ID: FF060502.1270088</b>	
City State Zip Code San Antonio TX 78230-3116	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Allan W. Chartier

Mailing Address 14001 Chalco Valley Pkwy

City State Zip Code  
Omaha NE 68138-6191

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

Name of Employer Occupation  
Midwest Industrial Tools, Inc. President/C.E.O.

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060502.1270096

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jesse Scott

Mailing Address PO Box 916

City State Zip Code  
Leakey TX 78873-0916

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

Name of Employer Occupation  
Self General Coontractor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060502.1280004

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Andrew Benedict

Mailing Address 4112 Estes Rd

City State Zip Code  
Nashville TN 37215-2220

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 326.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060502.1280072

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Glenn M. Wykoff		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 21541 State Route 4		Transaction ID: FF060502.1290007	
City Marysville	State OH	Zip Code 43040-9736	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Steve T. Gillen		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 5306 29th St NE		Transaction ID: FF060502.1290013	
City Tacoma	State WA	Zip Code 98422-3202	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Marine Assoc.	Occupation Long Shoreman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Carolyn S. Dunbar		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 146 Black Thorn Dr		Transaction ID: FF060502.1290015	
City Jonesborough	State TN	Zip Code 37659-4792	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	325.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William M. Snow, Jr.

Mailing Address 532 Northpark Dr

City State Zip Code  
Bossier City LA 71111-2242

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 821.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1290016

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Angel Pedrosa

Mailing Address 20 Km 5 Hm 1 Rural Route  
PO Box 878

City State Zip Code  
Guaynabo PR 00970-0878

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1290023

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William H. Brezovski

Mailing Address 4754 E Flamingo Rd  
# 542

City State Zip Code  
Las Vegas NV 89121-4709

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1290032

Amount of Each Receipt this Period  
5.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	155.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Thomas Pullin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 459 PO Box 459		<b>Transaction ID:</b> FF060502.1290036	
City Delcambre	State LA	Zip Code 70528-0459	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David G. Moore, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 10619 Jerusalem Rd		<b>Transaction ID:</b> FF060502.1290045	
City Curtice	State OH	Zip Code 43412-9419	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Syntech		Occupation Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John H. Panton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1431 Jackson Ave		<b>Transaction ID:</b> FF060502.1300019	
City River Forest	State IL	Zip Code 60305-1111	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Donald J. Young

Mailing Address 1800 Repoll Rd

City State Zip Code  
Mobile AL 36695-9270

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060502.1300024

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Jacqueline Smith

Mailing Address 329 Putnam Ave

City State Zip Code  
Zanesville OH 43701-4948

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 646.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060502.1300031

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald J. Young

Mailing Address 1800 Repoll Rd

City State Zip Code  
Mobile AL 36695-9270

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060502.1310006

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Jeanne M. Tarbox</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 17944 Meadow Creek Dr		<b>Transaction ID: FF060502.1310007</b>	
City State Zip Code Eagle River AK 99577-8248	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Sandra N. Singh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 467 Main St		<b>Transaction ID: FF060502.1310016</b>	
City State Zip Code Orange NJ 07050-1522	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Unlimited Dresses Incorporated	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Ione E. Half</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 107 Ranch Rd 620 S Ste 102		<b>Transaction ID: FF060502.1310018</b>	
City State Zip Code Lakeway TX 78734-3999	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Half Interests	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	590.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel C. Lefebvre

Mailing Address PO Box 335

City State Zip Code  
Pittsburg NH 03592-0335

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1310030

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Andrew G. Irick, II

Mailing Address 3072 Hampton Ct

City State Zip Code  
Clearwater FL 33761-2006

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

Name of Employer Self Occupation Land Developer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1310033

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Alan R. Feuerstein

Mailing Address 17 Saint Louis Pl

City State Zip Code  
Buffalo NY 14202-1502

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

Name of Employer Feuerstein & Smith Llp Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1310035

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Jean A. Murphy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 9049		<b>Transaction ID:</b> FF060502.1320002	
City Kailua Kona	State HI	Amount of Each Receipt this Period 200.00	
Zip Code 96745-9049		FEC ID number of contributing federal political committee. C	
Name of Employer Clark Realty Co.	Occupation V.P.	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 552.00			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Terry L. Crenshaw		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 555 Hahaione St Apt 10D		<b>Transaction ID:</b> FF060502.1320012	
City Honolulu	State HI	Amount of Each Receipt this Period 250.00	
Zip Code 96825-1461		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert S. McEldowney		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 222 Aiokoa St		<b>Transaction ID:</b> FF060502.1320013	
City Kailua	State HI	Amount of Each Receipt this Period 50.00	
Zip Code 96734-1606		FEC ID number of contributing federal political committee. C	
Name of Employer Applied Safety Management Llc	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 651.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David B. Richard

Mailing Address 82 Birch Ave

City State Zip Code  
Corte Madera CA 94925-1053

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1320022

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Delbert E. Glaser

Mailing Address 31997 Sand Ridge Rd

City State Zip Code  
Lebanon OR 97355-9232

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 631.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1320029

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edwin R. Lewis

Mailing Address PO Box 11589

City State Zip Code  
Bainbridge Is WA 98110-5589

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1320034

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Raymond E. Swift

Mailing Address 2500 E Vineyard Ave  
Ste 301

City Oxnard State CA Zip Code 93036-1378

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

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

Transaction ID: FF060502.1320040

Amount of Each Receipt this Period  
205.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Constance D. Hunter

Mailing Address 4329 S Atlantic Ave

City Ponce Inlet State FL Zip Code 32127-6903

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: FF060502.1320042

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Martha R. Peak

Mailing Address 3500 Princeton Ave

City Dallas State TX Zip Code 75205-3247

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: FF060502.1330002

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	705.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Cora P. Elsner		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1850 Alice St Apt 1205		<b>Transaction ID:</b> FF060502.1330013	
City State Zip Code Oakland CA 94612-4131	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 376.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles Turner		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 5659 Native Dancer Rd S		<b>Transaction ID:</b> FF060502.1330014	
City State Zip Code Palm Bch Gdns FL 33418-7733	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James R. Brigham		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 24 Water Oak Dr		<b>Transaction ID:</b> FF060502.1330016	
City State Zip Code Hilton Head SC 29928-3009	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 501.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

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

Mailing Address 104 Wayne St  
PO Box 86

City Howe State IN Zip Code 46746-0086

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

**Transaction ID:** FF060502.1330018

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey J. Woods

Mailing Address 4932 Eckert Cir

City Castle Rock State CO Zip Code 80104-5214

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

Name of Employer J Almes Ceramic Occupation Artist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

**Transaction ID:** FF060502.1340009

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Neal Savage

Mailing Address 6340 S 3000 E

City Salt Lake City State UT Zip Code 84121-3540

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

Name of Employer Savage Companies Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

**Transaction ID:** FF060502.1340010

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>425.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Donald W. Smiley

Mailing Address PO Box 1757

City Mammoth Lakes State CA Zip Code 93546-1757

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1340012

Amount of Each Receipt this Period  
45.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Donald J. Young

Mailing Address 1800 Repoll Rd

City Mobile State AL Zip Code 36695-9270

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1340029

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Verne A. Dodson

Mailing Address 3617 Blossom Heath Rd

City Dayton State OH Zip Code 45419-1108

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

Name of Employer Mound Family Practice Occupation Family Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1340033

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	115.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Harold M. Wit		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 150 E 69th St # 19N		<b>Transaction ID:</b> FF060502.1340037
City State Zip Code New York NY 10021-5704	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3001.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. June Stutzman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 100 McNamee Ln Apt 204		<b>Transaction ID:</b> FF060502.1350020
City State Zip Code Rising Sun MD 21911-2261	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Christina Lee Buffkin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 355 E Hall Rd		<b>Transaction ID:</b> FF060502.1360003
City State Zip Code Merritt Island FL 32953-8408	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Cermaic Tile Supply Inc.	Occupation Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	825.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Omer L. King, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address <b>4283 Muirwood Ct</b>		<b>Transaction ID: FF060502.1360005</b>	
City <b>Reno</b>	State <b>NV</b>	Zip Code <b>89509-7006</b>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Edward F. Whitney</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address <b>PO Box 134</b>		<b>Transaction ID: FF060502.1360008</b>	
City <b>Dublin</b>	State <b>NH</b>	Zip Code <b>03444-0134</b>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Elaine M. Arcenas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address <b>42 Brentwood Rd</b>		<b>Transaction ID: FF060502.1360013</b>	
City <b>Bay Shore</b>	State <b>NY</b>	Zip Code <b>11706-6924</b>	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Arcenas Pediatrics	Occupation President/ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David G. McCollum

Mailing Address 45 Sammis St

City State Zip Code  
Norwalk CT 06853-1515

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

**Transaction ID:** FF060502.1360015

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Gladys S. Leach

Mailing Address 5 Greenlawn Dr

City State Zip Code  
Pittsburgh PA 15220-2502

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

Name of Employer G & W Leach Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

**Transaction ID:** FF060502.1360021

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joseph P. Jennings

Mailing Address 3380 Greenway Ave

City State Zip Code  
Cincinnati OH 45248-5119

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

**Transaction ID:** FF060502.1360027

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>875.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Faye Allen		Date of Receipt MM / DD / YYYY 05 / 01 / 2006
Mailing Address 107 Douglas Dr		<b>Transaction ID:</b> FF060502.1360039
City Oxford	State MS	Zip Code 38655-2803
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Thomas Pullin		Date of Receipt MM / DD / YYYY 05 / 01 / 2006
Mailing Address PO Box 459 PO Box 459		<b>Transaction ID:</b> FF060502.1370001
City Delcambre	State LA	Zip Code 70528-0459
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James R. Brigham		Date of Receipt MM / DD / YYYY 05 / 01 / 2006
Mailing Address 24 Water Oak Dr		<b>Transaction ID:</b> FF060502.1390004
City Hilton Head	State SC	Zip Code 29928-3009
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	52.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dan L. Gallery

Mailing Address 8609 N 4020 Rd

City Wann State OK Zip Code 74083-2038

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

Name of Employer Self Employed Occupation Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: FF060502.1410003

Amount of Each Receipt this Period  
21.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Teresina V. De Luca

Mailing Address 396 Coventry Rd

City Kensington State CA Zip Code 94707-1251

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: FF060502.1410038

Amount of Each Receipt this Period  
6.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Charles R. Rigdon

Mailing Address 410 Darrow Dr

City Duluth State GA Zip Code 30097-2430

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: FF060502.1440005

Amount of Each Receipt this Period  
102.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	129.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roger E. Cobb

Mailing Address PO Box 13694

City State Zip Code  
Milwaukee WI 53213-0694

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

Name of Employer Self Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1440021

Amount of Each Receipt this Period  
201.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John C. Hunt

Mailing Address 93 Riggs Ave

City State Zip Code  
West Hartford CT 06107-3034

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1440024

Amount of Each Receipt this Period  
201.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Willard C. Barbee

Mailing Address 378 Parkway Church Rd

City State Zip Code  
Morristown TN 37814-6423

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1440044

Amount of Each Receipt this Period  
26.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>428.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Angelakis Lampronikos</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 166 Canfield Ave		<b>Transaction ID: FF060502.1440056</b>	
City State Zip Code Bridgeport CT 06605-2909	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A & L Home Improvement LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Charlotte M. Arbogast</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 22 Saint Peter Cir		<b>Transaction ID: FF060502.1440069</b>	
City State Zip Code Lititz PA 17543-2238	Amount of Each Receipt this Period 501.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 801.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Mary A. Compisi</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 11311 Ketchum Rd		<b>Transaction ID: FF060502.1440070</b>	
City State Zip Code North Collins NY 14111-9741	Amount of Each Receipt this Period 251.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 726.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	803.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. R. H. Hoffmann

Mailing Address 5146 Belden Ave  
Apt C2

City Downers Grove State IL Zip Code 60515-4766

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

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

Transaction ID: FF060502.1450010

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Alan E. Burch

Mailing Address 1025 Maine Ave

City Hainesport State NJ Zip Code 08036-2914

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
541.00

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

Transaction ID: FF060502.1450013

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marguerite K. Meeker

Mailing Address 5254 N Manitou Trl W

City Leland State MI Zip Code 49654-9710

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

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

Transaction ID: FF060502.1450014

Amount of Each Receipt this Period  
251.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	403.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Anthony W. Raskob

Mailing Address 2060 Briargate Pkwy Ste 170

City State Zip Code  
Colorado Springs CO 80920-7660

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

Name of Employer Solubit Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 631.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1450026

Amount of Each Receipt this Period  
51.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel N. Nyimicz

Mailing Address 113 Rivoli Woods Dr

City State Zip Code  
Macon GA 31210-4519

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1450036

Amount of Each Receipt this Period  
46.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Howard D. Passage

Mailing Address 13010 McDuffee Run

City State Zip Code  
Carmel IN 46033-8818

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060502.1450050

Amount of Each Receipt this Period  
6.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	103.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Flora N. Guglielmino</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 565 Moreno Ave		<b>Transaction ID: FF060502.1460026</b>	
City State Zip Code Los Angeles CA 90049-4840	Amount of Each Receipt this Period 751.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1351.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. William H. Littleton</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 1447 N Wishon Ave		<b>Transaction ID: FF060502.1460028</b>	
City State Zip Code Fresno CA 93728-1824	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Farmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert J. Bell</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 25 Morro Bay		<b>Transaction ID: FF060502.1460050</b>	
City State Zip Code Irvine CA 92602-1083	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1053.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Erika Pastal</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1 Governors Ln		<b>Transaction ID: FF060502.1470015</b>	
City Princeton	State NJ	Zip Code 08540-3666	Amount of Each Receipt this Period 201.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Owner/operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Thomas P. King</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 605		<b>Transaction ID: FF060502.1470058</b>	
City Chatham	State MA	Zip Code 02633-0605	Amount of Each Receipt this Period 301.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. John Fusaro, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 612 Mandy Ct		<b>Transaction ID: FF060502.1470070</b>	
City Morehead City	State NC	Zip Code 28557-4950	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	602.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. William J. Kottemann		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 835 Partenwood Rd		<b>Transaction ID:</b> FF060502.1470078	
City State Zip Code Orono MN 55356-9730	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kottemann Orthodontics	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David R. Schad		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 424 Masonic Dr		<b>Transaction ID:</b> FF060502.1470087	
City State Zip Code York PA 17402-1218	Amount of Each Receipt this Period 301.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bennett Williams Realty Inc.	Occupation Real Estate Commercial Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1101.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Diane M. Lucido		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address PO Box 4260		<b>Transaction ID:</b> FF060502.1480019	
City State Zip Code Wichita Falls TX 76308-0260	Amount of Each Receipt this Period 151.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	552.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Carroll E. Caldwell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 4263 Bay Beach Ln Apt 211		<b>Transaction ID:</b> FF060502.1480047	
City State Zip Code Fort Myers Beach FL 33931-6902	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Carol L. Harding		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 11550 E Baseline Rd		<b>Transaction ID:</b> FF060502.1480056	
City State Zip Code Hickory Crnrs MI 49060-9515	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Harding Galesburg	Occupation Secretary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Paul D. Harkins, MD		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 5205 Hedrick Dr		<b>Transaction ID:</b> FF060502.1480058	
City State Zip Code Greensboro NC 27410-9342	Amount of Each Receipt this Period 102.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	254.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Quentin Nigg		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 32		Transaction ID: FF060502.1480065	
City Hanceville	State AL	Zip Code 35077-0032	Amount of Each Receipt this Period 76.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00		

B. Full Name (Last, First, Middle Initial) Dr. Izea D. Katzap		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 18424 Hovendon Rd		Transaction ID: FF060502.1490038	
City Jamaica	State NY	Zip Code 11432-2424	Amount of Each Receipt this Period 151.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Dentist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

C. Full Name (Last, First, Middle Initial) Ms. Sue C. Garner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 3110 W Florida Ave		Transaction ID: FF060502.1490074	
City Melbourne	State FL	Zip Code 32904-7600	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	427.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Douglas M. Reiter

Mailing Address 1217 Lake Front Rd

City State Zip Code  
Lake Oswego OR 97034-4607

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

Name of Employer Self Occupation Self Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060502.1500001

Amount of Each Receipt this Period  
501.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Edgar Horndt

Mailing Address 4128 Highway 71

City State Zip Code  
Columbus TX 78934-4902

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
476.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060502.1500009

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ray Cannon

Mailing Address 760 S Sunny Slope Rd

City State Zip Code  
Brookfield WI 53005-4172

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060502.1500013

Amount of Each Receipt this Period  
31.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	583.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. William H. Toppan</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 28 Lake Rd		<b>Transaction ID: FF060502.1500024</b>	
City State Zip Code Menasha WI 54952-3416	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. George J. Farha</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 1313 N Webb Rd Ste 240		<b>Transaction ID: FF060502.1500035</b>	
City State Zip Code Wichita KS 67206-4077	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Gregory Hufman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 578 E Burnett Rd		<b>Transaction ID: FF060502.1500038</b>	
City State Zip Code Island Lake IL 60042-9203	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer G & W Technical Corp.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	253.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Ella E. Fullin		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address PO Box 503		<b>Transaction ID:</b> FF060502.1500053	
City Anna Maria	State FL	Amount of Each Receipt this Period 86.00	
Zip Code 34216-0503		FEC ID number of contributing federal political committee. C	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 331.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Sharon M. Waldron		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 1605 Billy Casper Dr		<b>Transaction ID:</b> FF060502.1510014	
City El Paso	State TX	Amount of Each Receipt this Period 101.00	
Zip Code 79936-4627		FEC ID number of contributing federal political committee. C	
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 351.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Alex De Jesus		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 1823 Walker Ln		<b>Transaction ID:</b> FF060502.1510036	
City Henderson	State NV	Amount of Each Receipt this Period 126.00	
Zip Code 89014-4015		FEC ID number of contributing federal political committee. C	
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 241.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	313.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Julieta E. Averitt

Mailing Address 316 Regal Dr  
PO Box 440129

City Laredo State TX Zip Code 78044-0129

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 626.00

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

Transaction ID: FF060502.1510044

Amount of Each Receipt this Period  
376.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Milton M. Harris

Mailing Address PO Box 312

City Ruth State NV Zip Code 89319-0312

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

Name of Employer Round Mountain Cold Occupation Truck Driver

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

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

Transaction ID: FF060502.1510046

Amount of Each Receipt this Period  
201.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Hushang Haghighat

Mailing Address 9985 Sierra Ave

City Fontana State CA Zip Code 92335-6720

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

Name of Employer Kaiser Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

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

Transaction ID: FF060502.1510051

Amount of Each Receipt this Period  
102.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	679.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John H. Ernster		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 796 Via Somonte		<b>Transaction ID:</b> FF060502.1510056	
City Palos Verdes Estat	State CA	Zip Code 90274-1629	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Small Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Thomas G. Getz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 8 Wildwood Dr		<b>Transaction ID:</b> FF060502.1510068	
City Moline	State IL	Zip Code 61265-6136	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Moline, Inc	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joseph N. Chairge		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 203 Clark Rd		<b>Transaction ID:</b> FF060503.0070001	
City Duryea	State PA	Zip Code 18642-1112	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Avoca Mach. Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2136.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	501.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Bohdan Stryk</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2006
Mailing Address PO Box 31488		<b>Transaction ID:</b> FF060503.0070003
City Phoenix	State AZ	Zip Code 85046-1488
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer The Boardi Corp.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Steve Walton</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2006
Mailing Address 27 Market St		<b>Transaction ID:</b> FF060503.0070004
City Onancock	State VA	Zip Code 23417-1911
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Baysys Technologies Llc	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Gilbert H. Todd</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2006
Mailing Address 1604 W Morton Ave		<b>Transaction ID:</b> FF060503.0070006
City Jacksonville	State IL	Zip Code 62650-2718
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Premiere Bank	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Gary J. Summers</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 2570 W El Camino Real Ste 650		<b>Transaction ID: FF060503.0070008</b>	
City State Zip Code Mountain View CA 94040-1310	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Silicon Valley Expert Witness	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Russell R. Consentino</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 424 Mahogany Walk		<b>Transaction ID: FF060503.0070009</b>	
City State Zip Code Newtown PA 18940-4211	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1900.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Keith Owings</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 4487 SW Bowsprit Dr		<b>Transaction ID: FF060503.0070010</b>	
City State Zip Code Lees Summit MO 64082-4713	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Delta Sweeping Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Leo A. Zupan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1115 Barrington Cir		<b>Transaction ID: FF060503.0070011</b>	
City State Zip Code Ashland OR 97520-9551	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jerome L. Holub</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 159 S Main St Ste 912		<b>Transaction ID: FF060503.0070013</b>	
City State Zip Code Akron OH 44308-1323	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jerome Holub and Associates	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 801.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Jim Young</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 4609 Grape Rd Ste A7		<b>Transaction ID: FF060503.0070014</b>	
City State Zip Code Mishawaka IN 46545-8257	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sony's Korean Cuisine	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John P. Husband		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 605 E McKinley Ave		Transaction ID: FF060503.0080001	
City State Zip Code Mishawaka IN 46545-4119	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard Smith		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 333 Norton Rd PO Box 28207		Transaction ID: FF060503.0080003	
City State Zip Code Columbus OH 43228-0207	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Karen L. Carnivale		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 320 Sunnyhill Rd		Transaction ID: FF060503.0080005	
City State Zip Code Lunenburg MA 01462-2046	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Karen Carnivale Real Estate Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President	Aggregate Year-to-Date ▼ 260.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Rigoberto Garcia		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 203 E 2nd St		<b>Transaction ID:</b> FF060503.0090001	
City State Zip Code Muscatine IA 52761-4006	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Guadalupe Mex. Rest Cook	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Anthony V. Sainato		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 12900 Lake Ave		<b>Transaction ID:</b> FF060503.0100004	
City State Zip Code Lakewood OH 44107-1577	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Self Self	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ronald Richards		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 579 Wesley Rd		<b>Transaction ID:</b> FF060503.0100007	
City State Zip Code Creve Coeur IL 61610-3865	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Self Business Owner	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Timothy Schumann

Mailing Address 700 W Virginia St  
Ste 602

City State Zip Code  
Milwaukee WI 53204-1515

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

**Transaction ID:** FF060503.0100008

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William M. Anderson

Mailing Address PO Box 2291

City State Zip Code  
East Peoria IL 61611-0291

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

Name of Employer Occupation  
Self Custom Tool Maker

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

**Transaction ID:** FF060503.0100012

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steve R. Waters

Mailing Address 400 Front St

City State Zip Code  
Beaufort NC 28516-2100

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

Name of Employer Occupation  
Self Retail

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

**Transaction ID:** FF060503.0100013

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George C. Rainey

Mailing Address PO Box 2014

City State Zip Code  
Midland TX 79702-2014

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

Name of Employer Superior Hydrolics  
Occupation Service Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0100014

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Kathy Jo McCloskey

Mailing Address 2780 Hilary Ct

City State Zip Code  
Thousand Oaks CA 91362-4683

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

Name of Employer Hallmark Corp.  
Occupation Retail Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0100015

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald E. Shamp

Mailing Address 3400 Silica Rd

City State Zip Code  
Sylvania OH 43560-9727

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

Name of Employer Fuse Tech Hot Tech Group Inc.  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0100017

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jimmy Cruz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1711 Gallop Dr		<b>Transaction ID:</b> FF060503.0100019	
City State Zip Code Loxahatchee FL 33470-3929	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Maloka Jewelers	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Beverley Frommert		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 3010 Warren Rd		<b>Transaction ID:</b> FF060503.0110003	
City State Zip Code Ann Arbor MI 48105-9717	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Veterinarian		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Dean C. Prappas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 725168		<b>Transaction ID:</b> FF060503.0110004	
City State Zip Code Berkley MI 48072-5168	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 74 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Alexandru D. Dimitriu

Mailing Address 8421 S Orange Blossom Trl

City State Zip Code  
Orlando FL 32809-7905

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

Name of Employer Eastcom Security Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060503.0110005

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry Lanning

Mailing Address 43191 Moore Cir

City State Zip Code  
Bermuda Dunes CA 92203-3501

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

Name of Employer Jats Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060503.0110008

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Jose R. Navato

Mailing Address 3624 NW Blue Jacket Dr

City State Zip Code  
Lees Summit MO 64064-3013

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: FF060503.0110009

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Kamal Salah</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 8407 S Harlem Ave		<b>Transaction ID: FF060503.0110012</b>	
City State Zip Code Bridgeview IL 60455-1755	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation President	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Adel Nabil</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 9207 Jamaica Ave		<b>Transaction ID: FF060503.0110014</b>	
City State Zip Code Jamaica NY 11421-2108	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Associates Medical Services Occupation Business Administrator	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Ms. Bernadette McBride</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 268 Jenna Rd		<b>Transaction ID: FF060503.0110019</b>	
City State Zip Code Kennewick WA 99338-7338	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Legacy Mgmt. Inc. Occupation Nurse Practitioner	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Susan E. Anders

Mailing Address 4924 Linkside Dr

City State Zip Code  
Las Vegas NV 89130-0115

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

Name of Employer Occupation  
Biomats USA Inc. Quality Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0110020

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Marilyn Brooks Penn

Mailing Address 2117 Brooklyn Ave

City State Zip Code  
Kansas City MO 64127-3029

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

Name of Employer Occupation  
Self Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0110021

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Matthew Kim

Mailing Address 5830 Cattleya Way

City State Zip Code  
San Ramon CA 94582-5063

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

Name of Employer Occupation  
Usmicd President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0110026

Amount of Each Receipt this Period  
500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Marvin E. Saul		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address W139 Norden Rd		<b>Transaction ID:</b> FF060503.0110028	
City Mondovi	State WI	Amount of Each Receipt this Period 300.00	
Zip Code 54755-7852			
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Lease/Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Doug Markworth		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 4300 S Lakeport St Ste 102B		<b>Transaction ID:</b> FF060503.0110030	
City Sioux City	State IA	Amount of Each Receipt this Period 300.00	
Zip Code 51106-9533			
FEC ID number of contributing federal political committee. C			
Name of Employer Missouri Valley Honey LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Orvalee Farris		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 3735 SE Martins St		<b>Transaction ID:</b> FF060503.0110031	
City Portland	State OR	Amount of Each Receipt this Period 500.00	
Zip Code 97202-7643			
FEC ID number of contributing federal political committee. C			
Name of Employer Dove Care Center	Occupation Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Krestine D. Corbin

Mailing Address PO Box 435

City State Zip Code  
Reno NV 89504-0435

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: FF060503.0330033

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. G. David Jang

Mailing Address 30725 Eastern Ln

City State Zip Code  
Redlands CA 92374-7707

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

Name of Employer Occupation  
Self Physician, Businessman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: FF060503.0330035

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John M. Snodsmith

Mailing Address 57 Oak Ln

City State Zip Code  
Springfield IL 62712-8611

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

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

Transaction ID: FF060503.0410003

Amount of Each Receipt this Period  
255.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1005.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 79 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Eduardo Rodriguez

Mailing Address 8000 W 24th Ave  
Ste 1

City State Zip Code  
Hialeah FL 33016-5588

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

Name of Employer Occupation  
Florida Tropical Estates Inc Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1001.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

**Transaction ID:** FF060503.0430004

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Barbara Y. Benner

Mailing Address 225 N Broad St

City State Zip Code  
Allentown PA 18104-5347

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

**Transaction ID:** FF060503.0430005

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Paul M. Richards

Mailing Address PO Box 20829

City State Zip Code  
Juneau AK 99802-0829

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

Name of Employer Occupation  
Self Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 351.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 01 / 2006

**Transaction ID:** FF060503.0440002

Amount of Each Receipt this Period  
151.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>851.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Rosemary G. Parkin

Mailing Address 930 Tamiami Trl S  
Apt 537

City State Zip Code  
Venice FL 34285-3640

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼      201.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

**Transaction ID:** FF060503.0440006

Amount of Each Receipt this Period  
201.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. F. McDonald

Mailing Address 1051 Indian Mound Trl

City State Zip Code  
Vero Beach FL 32963-2406

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

**Transaction ID:** FF060503.0450001

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Badr E. Jebara

Mailing Address 199 Lava Rd  
Rm 1903

City State Zip Code  
Far Hills NJ 07931

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

Name of Employer Poco Sports      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼      501.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

**Transaction ID:** FF060503.0480009

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	452.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey C. Newlin

Mailing Address PO Box 280

City State Zip Code  
Henryville IN 47126-0280

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

Name of Employer Bartlett Nuclear  
Occupation Radiological Control Technician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
336.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0480012

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Michael O. Magan

Mailing Address 12246 Roundwood Rd  
Unit 703

City State Zip Code  
Timonium MD 21093-3254

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

Name of Employer Self  
Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0480054

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Shelby J. Smith

Mailing Address 11840 Road 505

City State Zip Code  
Union MS 39365-7324

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

Name of Employer Self  
Occupation Business Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0490019

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Mabel M. Dowke</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 2396 Pine St Apt 106		<b>Transaction ID: FF060503.0490021</b>	
City State Zip Code San Francisco CA 94115-2737	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Amcomm Systems	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2801.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Carlton F. Meredith</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 17 Nohono Rd		<b>Transaction ID: FF060503.0490026</b>	
City State Zip Code Mashpee MA 02649-4477	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Roy D. Guthrie</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 13050 E 28th Pl		<b>Transaction ID: FF060503.0490027</b>	
City State Zip Code Tulsa OK 74134-2422	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 83 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Bonnie Liles

Mailing Address 2707 Burlwood Ct

City State Zip Code  
Midlothian VA 23113-1128

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

Name of Employer Self Occupation  
Office Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0490028

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Francis G. Hurite

Mailing Address 215 Grandview Dr N

City State Zip Code  
Pittsburgh PA 15215-1515

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

Name of Employer Everett & Hurite Ophthalmic Associates Occupation  
Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0490031

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Lena B. Hopkins

Mailing Address 4150 Marshall Rd

City State Zip Code  
Rock Hill SC 29730-9646

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0490039

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Frank C. Alfonso		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 407 Huntridge Dr		<b>Transaction ID:</b> FF060503.0490044	
City State Zip Code Venice FL 34292-3174	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael Gholami		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 440 Hearn Ave		<b>Transaction ID:</b> FF060503.0490045	
City State Zip Code Santa Rosa CA 95407-7824	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Thomas F. Emerson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 18158 Parvo Ct		<b>Transaction ID:</b> FF060503.0490052	
City State Zip Code San Diego CA 92128-1301	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Ethel V. Norton</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 330 E Olmos Dr		<b>Transaction ID: FF060503.0490059</b>	
City State Zip Code San Antonio TX 78212-2029	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Mark A. Wasserman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 10806 Ashton Ave		<b>Transaction ID: FF060503.0490064</b>	
City State Zip Code Los Angeles CA 90024-5025	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mitchell Silverburg & Knapp	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Faith D. Alexander</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address PO Box 536		<b>Transaction ID: FF060503.0490067</b>	
City State Zip Code Crescent City CA 95531-0536	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. G. Edward Cusick, Jr.

Mailing Address 897 Fording Island Rd  
Apt 1602

City Bluffton State SC Zip Code 29910-8805

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

Name of Employer Self Employed Occupation Disabled

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
233.00

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

**Transaction ID:** FF060503.0500051

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Everett B. Tufts, Jr.

Mailing Address PO Box 265

City West Bridgewater State MA Zip Code 02379-0265

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

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

**Transaction ID:** FF060503.0500058

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Joan L. Mc Donald

Mailing Address 24172 Paseo Del Campo

City Laguna Niguel State CA Zip Code 92677-2409

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

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

**Transaction ID:** FF060503.0510004

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Stacy L. La Joie

Mailing Address 7300 Reynolds St

City Bakersfield State CA Zip Code 93307-8947

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0510091

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Verda L. Deveny

Mailing Address 9445 Grand Mesa Dr

City Las Vegas State NV Zip Code 89134-8933

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0510094

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Scott E. Berglund

Mailing Address 1057 Woods Creek Dr

City Delano State MN Zip Code 55328-9263

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

Name of Employer General Mills Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0520010

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Rick Thurston		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 3440 Lamar Ave		<b>Transaction ID:</b> FF060503.0520039	
City Memphis	State TN	Zip Code 38118-1612	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
Name of Employer Supply Line Memphis	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Claudia Smith		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 3 Via La Cima		<b>Transaction ID:</b> FF060503.0520070	
City Rch Palos Vrd	State CA	Zip Code 90275-3481	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Roy D. Guthrie		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 13050 E 28th Pl		<b>Transaction ID:</b> FF060503.0630004	
City Tulsa	State OK	Zip Code 74134-2422	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	52.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Carlton F. Meredith</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 17 Nohono Rd		<b>Transaction ID: FF060503.0630005</b>	
City Mashpee      State MA      Zip Code 02649-4477	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Shelby J. Smith</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 11840 Road 505		<b>Transaction ID: FF060503.0630010</b>	
City Union      State MS      Zip Code 39365-7324	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas F. Emerson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 18158 Parvo Ct		<b>Transaction ID: FF060503.0630021</b>	
City San Diego      State CA      Zip Code 92128-1301	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Frank C. Alfonso

Mailing Address 407 Huntridge Dr

City State Zip Code  
Venice FL 34292-3174

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

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

Transaction ID: FF060503.0630027

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Lena B. Hopkins

Mailing Address 4150 Marshall Rd

City State Zip Code  
Rock Hill SC 29730-9646

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

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

Transaction ID: FF060503.0630031

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Faith D. Alexander

Mailing Address PO Box 536

City State Zip Code  
Crescent City CA 95531-0536

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

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

Transaction ID: FF060503.0630039

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	425.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark A. Wasserman

Mailing Address 10806 Ashton Ave

City State Zip Code  
Los Angeles CA 90024-5025

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

Name of Employer Mitchell Silverburg & Knupp  
Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0630041

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Lcdr Melvin K. Hull, Ret.

Mailing Address 7 Sunshine Way

City State Zip Code  
Eureka CA 95503-7408

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

Name of Employer Retired  
Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0630049

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Tommy L. Goodwyn

Mailing Address 2711 Carriage Ln

City State Zip Code  
Carrollton TX 75006-4731

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

Name of Employer Entest  
Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: FF060503.0630054

Amount of Each Receipt this Period  
151.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	276.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William C. Bedortha		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address PO Box 8867		<b>Transaction ID:</b> FF060503.0630056	
City Horseshoe Bay	State TX	Zip Code 78657-8867	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Maria Santiago		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address PO Box 3389		<b>Transaction ID:</b> FF060503.0630061	
City Juncos	State PR	Zip Code 00777-6389	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 221.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Badr E. Jebara		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 199 Lava Rd Rm 1903		<b>Transaction ID:</b> FF060503.0630065	
City Far Hills	State NJ	Zip Code 07931	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Poco Sports		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 501.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	651.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jeffrey C. Newlin		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address PO Box 280		<b>Transaction ID:</b> FF060503.0630068	
City State Zip Code Henryville IN 47126-0280	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bartlett Nuclear	Occupation Radiological Control Technician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Scott E. Berglund		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 1057 Woods Creek Dr		<b>Transaction ID:</b> FF060503.0630073	
City State Zip Code Delano MN 55328-9263	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer General Mills	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Daniel P. Sudnik		Date of Receipt M M / D D / Y Y Y Y Y 05 / 01 / 2006	
Mailing Address 5650 Wellfield Rd		<b>Transaction ID:</b> FF060503.0630078	
City State Zip Code Spring Hill FL 34609-2469	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mortgage Solutions	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	261.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Francis G. Hurite</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 215 Grandview Dr N		<b>Transaction ID: FF060503.0640001</b>	
City State Zip Code Pittsburgh PA 15215-1515	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Everett & Hurite Ophthalmic Associates	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Bonnie Liles</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 2707 Burlwood Ct		<b>Transaction ID: FF060503.0640003</b>	
City State Zip Code Midlothian VA 23113-1128	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Office Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael Gholami</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 440 Hearn Ave		<b>Transaction ID: FF060503.0640008</b>	
City State Zip Code Santa Rosa CA 95407-7824	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Paul K. Perry		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 3401 N Wilder Rd		<b>Transaction ID:</b> FF060503.0640013	
City State Zip Code Plant City FL 33565-2677	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jay T. Comeaux		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 2211 Augusta Dr Apt 18		<b>Transaction ID:</b> FF060503.0640016	
City State Zip Code Houston TX 77057-4771	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Stanford Group Co. Exec Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ethel V. Norton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 330 E Olmos Dr		<b>Transaction ID:</b> FF060503.0650007	
City State Zip Code San Antonio TX 78212-2029	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	301.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph A. Molluso

Mailing Address 15 W 72nd St  
Apt 25E

City State Zip Code  
New York NY 10023-3458

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

Name of Employer Occupation  
JP Morgan Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

**Transaction ID:** FF060503.0660003

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Harold L. Corley, Sr.

Mailing Address PO Box 127

City State Zip Code  
Williamson GA 30292-0127

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

**Transaction ID:** FF060503.0690010

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peder R. Johnson

Mailing Address 188 E Capitol St  
Ste 1300

City State Zip Code  
Jackson MS 39201-2141

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

Name of Employer Occupation  
K P M G Cpa

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

**Transaction ID:** FF060503.0750002

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Patricia J. Whitehead</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address PO Box 4246		<b>Transaction ID: FF060503.0760007</b>	
City Bisbee	State AZ	Zip Code 85603-4246	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Sierra Vista Regional Health	Occupation Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Joseph Hinds</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1635 Lakeside Dr		<b>Transaction ID: FF060503.0760026</b>	
City Redding	State CA	Zip Code 96001-5649	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 402.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Mark E. Sharafinski</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 9623 W Van Beck Ave		<b>Transaction ID: FF060503.0760029</b>	
City Greenfield	State WI	Zip Code 53228-2156	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance	Occupation Computer Programmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Michael K. Kluth

Mailing Address 7215 Oak Cove Ln

City State Zip Code  
Noblesville IN 46062-9415

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

Name of Employer Self Occupation Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

**Transaction ID:** FF060503.0760031

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Emma A. Hinshaw

Mailing Address 106 Sunshine Hill St  
Apt 201

City State Zip Code  
Spruce Pine NC 28777-2849

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

**Transaction ID:** FF060503.0800006

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Jennifer B. Littman

Mailing Address 140 Blades St

City State Zip Code  
Norfolk VA 23503-4704

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

**Transaction ID:** FF060503.0810001

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>611.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles J. Turner, Jr.

Mailing Address 900 N Island Dr NW

City Atlanta State GA Zip Code 30327-4624

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
05 / 02 / 2006

Transaction ID: FF060503.0810011

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Lois A. Wagner

Mailing Address 1275 Gulf Shore Blvd N Apt 302

City Naples State FL Zip Code 34102-4959

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
05 / 02 / 2006

Transaction ID: FF060503.0810018

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Faye Allen

Mailing Address 107 Douglas Dr

City Oxford State MS Zip Code 38655-2803

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
05 / 02 / 2006

Transaction ID: FF060503.0810027

Amount of Each Receipt this Period  
51.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	203.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Dennis J. Sullivan, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 280 S Collier Blvd Apt 905		<b>Transaction ID:</b> FF060503.0810030
City State Zip Code Marco Island FL 34145-4866	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Esther E. Ehlert		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address PO Box 206		<b>Transaction ID:</b> FF060503.0820044
City State Zip Code Dexter NM 88230-0206	Amount of Each Receipt this Period 51.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard J. Felter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 2626 Indian Hill Rd		<b>Transaction ID:</b> FF060503.0820052
City State Zip Code Cedar Rapids IA 52403-1530	Amount of Each Receipt this Period 126.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	227.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Thomas L. Cassidy</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 38 Canaan Close		<b>Transaction ID: FF060503.0820057</b>	
City State Zip Code New Canaan CT 06840-4920	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 776.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Linda T. Thomas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 6334 Elisa Dr S		<b>Transaction ID: FF060503.0820060</b>	
City State Zip Code Jacksonville FL 32216-5058	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Comfort Keepers	Occupation Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Kenneth W. Graham</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 6900 Coffeeport Rd Trlr 609		<b>Transaction ID: FF060503.0820066</b>	
City State Zip Code Brownsville TX 78521-6977	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	403.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Randy Schwandt

Mailing Address PO Box 27073

City State Zip Code  
Salt Lake City UT 84127-0073

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

Name of Employer Occupation  
Cate Equipment Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0820070

Amount of Each Receipt this Period  
201.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Jeannie C. Deutsch

Mailing Address 12328 Federal Dr

City State Zip Code  
Saint Louis MO 63131-3834

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0820076

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joseph Gary Gerath, Jr.

Mailing Address 60 Boone Trl

City State Zip Code  
Severna Park MD 21146-4534

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0830029

Amount of Each Receipt this Period  
451.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	902.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 103 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Wallace W. Bristow		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006
Mailing Address 600 E Flournoy Lucas Rd # CB20		<b>Transaction ID:</b> FF060503.0830038
City State Zip Code Shreveport LA 71153-0001	Amount of Each Receipt this Period 101.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 101.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 509.50	

Full Name (Last, First, Middle Initial) <b>B.</b> Lcdr Carl Hall, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006
Mailing Address 5141 Dunnellon Ave		<b>Transaction ID:</b> FF060503.0830040
City State Zip Code Memphis TN 38134-5211	Amount of Each Receipt this Period 26.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 26.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jerrold Jerome		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006
Mailing Address 41 Country Meadow Rd		<b>Transaction ID:</b> FF060503.0840005
City State Zip Code Rolling Hills Esta CA 90274-5774	Amount of Each Receipt this Period 101.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 101.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	228.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Arthur E. Nicols		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 4028 Hope St		<b>Transaction ID:</b> FF060503.0840015	
City State Zip Code San Diego CA 92115-6810	Amount of Each Receipt this Period 26.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Gary Nelson Liter, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 220 Sunrise Dr		<b>Transaction ID:</b> FF060503.0840017	
City State Zip Code Madison IN 47250-2735	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Tim S. Barnett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address PO Box 35156		<b>Transaction ID:</b> FF060503.0840022	
City State Zip Code Juneau AK 99803-5156	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Out Of Bounds	Occupation Process Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	328.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 105 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Sewell A. McMillan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 10123 Lambert International Airpor		<b>Transaction ID: FF060503.0840024</b>	
City State Zip Code Saint Louis MO 63145-1853	Amount of Each Receipt this Period 301.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. R. Scott Weaver</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 546 Moreboro Rd		<b>Transaction ID: FF060503.0840035</b>	
City State Zip Code Hatboro PA 19040-3953	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Reliance Standard Life Insurance	Occupation It		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Freddy Edwards</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address PO Box 430203		<b>Transaction ID: FF060503.0840043</b>	
City State Zip Code Pontiac MI 48343-0203	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	423.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Walter J. Hopkins

Mailing Address 903 W Avenue I

City Lovington State NM Zip Code 88260-5015

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 676.00

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

Transaction ID: FF060503.0840057

Amount of Each Receipt this Period  
 201.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Barbara J. Glerum

Mailing Address 5112 Piccadilly Cir

City Westminster State CA Zip Code 92683-4837

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: FF060503.0840077

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles W. Wood

Mailing Address 1517 Miramar Dr

City Newport Beach State CA Zip Code 92661-1431

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060503.0840079

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	276.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth S. Fitzgerald		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address PO Box 211		<b>Transaction ID:</b> FF060503.0850012	
City Fayetteville	State PA	Zip Code 17222-0211	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Earl E. Tiggemann		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 12769 N Shore Ln NW		<b>Transaction ID:</b> FF060503.0850016	
City Cass Lake	State MN	Zip Code 56633-2007	Amount of Each Receipt this Period 111.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Info Requested	Occupation Info Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. John B. Garnett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 3258 Fm 2943		<b>Transaction ID:</b> FF060503.0850026	
City Hereford	State TX	Zip Code 79045-7561	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Garnett Livestock Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	213.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Leah J. Jeffries		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 4805 Zakon Rd		<b>Transaction ID:</b> FF060503.0850031	
City State Zip Code Torrance CA 90505-4355	Amount of Each Receipt this Period 501.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1066.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Yuanyo Hsu		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 3111 Vicente St Apt 205		<b>Transaction ID:</b> FF060503.0850053	
City State Zip Code San Francisco CA 94116-2768	Amount of Each Receipt this Period 61.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. David L. Elson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 513 E Plum Creek Rd		<b>Transaction ID:</b> FF060503.0850083	
City State Zip Code Sioux Falls SD 57105-6950	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Aveva Health	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	613.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Charles W. Wood</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1517 Miramar Dr		<b>Transaction ID: FF060503.0860001</b>	
City State Zip Code Newport Beach CA 92661-1431	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Betty J. Covey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address RR 1 Box 105		<b>Transaction ID: FF060503.0860016</b>	
City State Zip Code Elkins WV 26241-9713	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Trinidad Gamez</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 9000 Floyd Curl Dr Apt 107		<b>Transaction ID: FF060503.0860020</b>	
City State Zip Code San Antonio TX 78240-1588	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 697.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	85.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. J. Claude Brannan

Mailing Address RR 1 Box 238

City State Zip Code  
Marietta OK 73448-9731

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

Name of Employer Self Occupation Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0860021

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Phyllis Meeker Swisher

Mailing Address 1015 N Old Woodward Ave

City State Zip Code  
Birmingham MI 48009-5409

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 565.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0860026

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James R. Hutton

Mailing Address 823 Old Lake Rd

City State Zip Code  
Houston TX 77057-1103

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

Name of Employer C B C O Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0870004

Amount of Each Receipt this Period  
100.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Cynthia Carsolin-Chang		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 901 Campus Dr Ste 305		<b>Transaction ID:</b> FF060503.0870006	
City State Zip Code Daly City CA 94015-4930	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Rebecca S. Gale		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 3895 Kenwood Dr		<b>Transaction ID:</b> FF060503.0870011	
City State Zip Code Beaumont TX 77706-3714	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Self Investment			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Steve M. Gose		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 8601 US Highway 212		<b>Transaction ID:</b> FF060503.0880001	
City State Zip Code Roberts MT 59070-9619	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retanco Oper. Inc. President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 112 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Kirby C. Owens		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 3505 Astor Dr NW		<b>Transaction ID:</b> FF060503.0890002
City Wilson	State Zip Code NC 27896-1603	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Arthur E. Nicols		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 4028 Hope St		<b>Transaction ID:</b> FF060503.0890003
City San Diego	State Zip Code CA 92115-6810	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Alfred Alan Haley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address PO Box 1168 # 177		<b>Transaction ID:</b> FF060503.0890005
City Barstow	State Zip Code CA 92312-1168	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Betty J. Covey

Mailing Address RR 1 Box 105

City Elkins State WV Zip Code 26241-9713

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0890013

Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Robert E. Stevens

Mailing Address 801 N Fm Road 1187

City Aledo State TX Zip Code 76008-4373

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0890017

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Elva E. Norton

Mailing Address 22268 Great Northern Dr

City Cold Spring State MN Zip Code 56320-9781

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0900002

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	560.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Vonda M. Green

Mailing Address 511 10th St

City State Zip Code  
Orange TX 77630-5630

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1301.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0900004

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James Sims

Mailing Address 1100 Brooks St SE

City State Zip Code  
Decatur AL 35601-6585

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

Name of Employer Defco Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0900005

Amount of Each Receipt this Period  
120.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. J. O. Sims

Mailing Address PO Box 1209

City State Zip Code  
Decatur AL 35602-1209

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

Name of Employer Defco Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0900006

Amount of Each Receipt this Period  
120.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>390.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. J. Bratton Betz		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 5365 Pavilion Grn S		<b>Transaction ID:</b> FF060503.0930005	
City State Zip Code Memphis TN 38119-4904	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ronald S. Nicol		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 39911 N 107th PI		<b>Transaction ID:</b> FF060503.0930007	
City State Zip Code Scottsdale AZ 85262-3363	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harry P. Hutchens		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 568 Trianon St		<b>Transaction ID:</b> FF060503.0930008	
City State Zip Code Houston TX 77024-4620	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Norman Goldstein		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 100 Kawehi Pl		<b>Transaction ID:</b> FF060503.0930010	
City State Zip Code Kula HI 96790-7802	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Alma M. Lasater		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 40 Blythewood Dr		<b>Transaction ID:</b> FF060503.0930077	
City State Zip Code Greenville SC 29607-1202	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 351.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Diann E. Billing		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 148 James Dr		<b>Transaction ID:</b> FF060503.0940010	
City State Zip Code Ringwood NJ 07456-2728	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Homemaker Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 301.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 117 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Margaret E. Morgan

Mailing Address 145 National Blvd

City State Zip Code  
Universal City TX 78148-4400

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
05 / 02 / 2006

Transaction ID: FF060503.0940014

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Blaise Alexander

Mailing Address 140 W 29th St  
Box 150

City State Zip Code  
Pueblo CO 81008-1002

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

Name of Employer Lincoln Enterprises, Inc. Occupation Investment Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
05 / 02 / 2006

Transaction ID: FF060503.0940017

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Carol W. Wagner-Crook

Mailing Address 10 Tanewood Ct

City State Zip Code  
Belleville IL 62223-3948

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
05 / 02 / 2006

Transaction ID: FF060503.0940024

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bruce A. Pedersen

Mailing Address 347 SW Bedrock St

City State Zip Code  
Lake City FL 32024-5150

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

Name of Employer  
Industrial Electrical Control & Desig

Occupation  
CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1001.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0940031

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Anne Gove

Mailing Address 631 Locust St

City State Zip Code  
Mound City KS 66056-5249

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

Name of Employer  
INFO REQUESTED

Occupation  
INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0940065

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Milton G. Mitchell

Mailing Address 4924 State Road 21

City State Zip Code  
Oshkosh WI 54904-8815

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

Name of Employer  
Retired

Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
551.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0940071

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 119 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Stuart S. Wells

Mailing Address 176 Wyoming Ave

City State Zip Code  
Maplewood NJ 07040-1050

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0940079

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Harold W. Bowman

Mailing Address 19029 US Highway 19 N  
Bldg 9

City State Zip Code  
Clearwater FL 33764-3015

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0940081

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth K. English

Mailing Address PO Box 500

City State Zip Code  
Solvang CA 93464-0500

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

Name of Employer EE & Associates Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.0950009

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Patricia K. Taylor</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 700 French Creek Ln		<b>Transaction ID: FF060503.0950061</b>	
City Fort Pierce	State FL	Zip Code 34982-8301	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert F. Baroch</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 6450 S Boston St Apt 1101		<b>Transaction ID: FF060503.0950068</b>	
City Greenwood Village	State CO	Zip Code 80111-5336	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Phyllis E.D. Brooks</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1536 NW 57th St		<b>Transaction ID: FF060503.0950076</b>	
City Gainesville	State FL	Zip Code 32605-6423	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold R. Logan

Mailing Address 3172 SE Fairway W

City State Zip Code  
Stuart FL 34997-6045

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.1000004

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Andrey Dudkin

Mailing Address 714 Winston Dr

City State Zip Code  
San Diego CA 92114-1039

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

Name of Employer Photon Research Associates Occupation Scientist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.1030005

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Caroline Chambers

Mailing Address PO Box 7009

City State Zip Code  
Eugene OR 97401-0009

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: FF060503.1030047

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael A. Scherrer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 17307 E Summer Rose Ct		<b>Transaction ID:</b> FF060504.0010002	
City State Zip Code Houston TX 77042	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Focus Exploration, LLC	Occupation Geophysicist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. J Hu		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 15188 NW Central Dr Ste 210		<b>Transaction ID:</b> FF060504.0010003	
City State Zip Code Portland OR 97229-7804	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Charles W. Wood		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1517 Miramar Dr		<b>Transaction ID:</b> FF060504.0050001	
City State Zip Code Newport Beach CA 92661-1431	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	801.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Edward F. Whitney		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address PO Box 134		Transaction ID: FF060504.0070004	
City Dublin	State NH	Zip Code 03444-0134	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Randall M. Cutler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 2198 Highway 48 W		Transaction ID: FF060504.0080034	
City McComb	State MS	Zip Code 39648-7528	Amount of Each Receipt this Period 2.00
FEC ID number of contributing federal political committee. C			
Name of Employer Law Office Of Randall M Cutler	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 502.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Diann E. Billing		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 148 James Dr		Transaction ID: FF060504.0120003	
City Ringwood	State NJ	Zip Code 07456-2728	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	103.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Blaise Alexander</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 140 W 29th St Box 150		<b>Transaction ID: FF060504.0150002</b>	
City Pueblo      State CO      Zip Code 81008-1002	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lincoln Enterprises, Inc.	Occupation Investment Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Margareta E. Morgan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 145 National Blvd		<b>Transaction ID: FF060504.0170011</b>	
City Universal City      State TX      Zip Code 78148-4400	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Todd B. Boyer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 2895 W Oxford Ave Unit 3		<b>Transaction ID: FF060504.0170020</b>	
City Englewood      State CO      Zip Code 80110-4370	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Stewart Boyer Inc.	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Steven P. Combs

Mailing Address 8685 Mentor Rd

City State Zip Code  
Mentor OH 44060-7960

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

Name of Employer Occupation  
Lake Orthopaedics Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

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

Transaction ID: FF060504.0280029

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Carl C. Gilchrist

Mailing Address 1007 Wetherby Way

City State Zip Code  
Alpharetta GA 30022-7119

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

Name of Employer Occupation  
Spencer Stewart Assoc. Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: FF060504.0280030

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mary J. Erickson

Mailing Address 1008 Fair Oaks Ave

City State Zip Code  
Oak Park IL 60302-1338

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: FF060504.0290079

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Saravana Rangaswamy</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 26 Roberts St N Ste 117		<b>Transaction ID: FF060504.0290088</b>	
City State Zip Code Fargo ND 58102-5201	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Infonero Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Lorna F. Peltier</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 14412 Collins St		<b>Transaction ID: FF060504.0290106</b>	
City State Zip Code Van Nuys CA 91401-4614	Amount of Each Receipt this Period 61.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Eminenc Home Health Care	Occupation Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Anne W. Loudermilch</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address PO Box 22		<b>Transaction ID: FF060504.0290129</b>	
City State Zip Code Point Clear AL 36564-0022	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	611.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 127 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Eddie L. Edmiston

Mailing Address 737 Old Moscow Mills Rd

City State Zip Code  
Troy MO 63379-2902

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

Name of Employer: Edmiston Pools Inc. Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: FF060504.0290189

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Julie Ribera

Mailing Address 710 Avenue N

City State Zip Code  
Marble Falls TX 78654-5527

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

Name of Employer: INFO REQUESTED Occupation: INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: FF060504.0320001

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Everton Patrick

Mailing Address 3542 Eastchester Rd

City State Zip Code  
Bronx NY 10469-1658

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

Name of Employer: Self Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: FF060504.0340002

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Jorge Segura</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1701 Baylor Ave		<b>Transaction ID: FF060504.0340004</b>	
City State Zip Code Waco TX 76706-2016	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Concrete	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Ivan Montoya</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 6506 Thoroughbred Loop		<b>Transaction ID: FF060504.0340010</b>	
City State Zip Code Odessa FL 33556-1859	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Maaco Auto Painting & Collision Repair Occupation Business Owner	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Ms. Ramona N. Tanner</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1371 State Route 1181 Willow Creek Farm		<b>Transaction ID: FF060504.0340011</b>	
City State Zip Code Bardwell KY 42023-8418	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation CEO	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Brian E. Blackwell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1589 W Shaw Ave Ste 19 Ste 19		<b>Transaction ID: FF060504.0340012</b>	
City State Zip Code Fresno CA 93711-3500	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Sales Rep.	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Albert C. Malsam</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 526 S 13th St		<b>Transaction ID: FF060504.0340013</b>	
City State Zip Code Wakeeney KS 67672-2656	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Malsam Terracing Co Inc Occupation Owner	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Jeffrey A. Gutierrez</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1930 22nd St		<b>Transaction ID: FF060504.0340015</b>	
City State Zip Code Bakersfield CA 93301-3801	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dewalt Corp. Occupation President/Civil Engineer	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Asfaw Zergabachew</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 107 Overlook Rd		<b>Transaction ID: FF060504.0340018</b>	
City State Zip Code Pomona NY 10970-2118	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Joyce A. Gibson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 8126 S South Shore Dr		<b>Transaction ID: FF060504.0340023</b>	
City State Zip Code Chicago IL 60617-1520	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Donald R. Green</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 3045 Inland Empire Blvd		<b>Transaction ID: FF060504.0410001</b>	
City State Zip Code Ontario CA 91764-4870	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Painting Contractor	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	551.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Ann E. Carrell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 2531 Top Hill Rd		<b>Transaction ID:</b> FF060504.0410012	
City Louisville	State KY	Zip Code 40206-2830	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 901.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Melissa Poynter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 178 Bellerive Blvd		<b>Transaction ID:</b> FF060504.0410036	
City Nicholasville	State KY	Zip Code 40356-8120	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer MostValuablePets	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Delmer A. Dreyer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 4200 E Skelly Dr Ste 325		<b>Transaction ID:</b> FF060504.0410058	
City Tulsa	State OK	Zip Code 74135-3234	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Financial Security Group, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID:</b> FF060504.0420003	
City Pasadena	State CA	Amount of Each Receipt this Period 30.00	
Zip Code 91106-3252			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID:</b> FF060504.0420004	
City Pasadena	State CA	Amount of Each Receipt this Period 30.00	
Zip Code 91106-3252			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert G. Greer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 708 Canterbury Dr		<b>Transaction ID:</b> FF060504.0420009	
City Warrenton	State MO	Amount of Each Receipt this Period 50.00	
Zip Code 63383-2246			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.50		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	110.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 133 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Ionel Marsavela		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address PO Box 1548		Transaction ID: FF060504.0440001	
City Loma Linda	State CA	Zip Code 92354-1548	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer M & T Trucking Co.	Occupation Truck Driver		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Hans Berstrom		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 2612 SW 15th St		Transaction ID: FF060504.0450009	
City Deerfield Bch	State FL	Zip Code 33442-6051	Amount of Each Receipt this Period 201.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harry Richard Schumacher		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 47 E 88th St		Transaction ID: FF060504.0450011	
City New York	State NY	Zip Code 10128-1152	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	501.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Ruth M. Dufresne</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 5241 Utica St		<b>Transaction ID: FF060504.0450012</b>	
City State Zip Code Metairie LA 70006-6445	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. J. O. Sims</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address PO Box 1209		<b>Transaction ID: FF060504.0460002</b>	
City State Zip Code Decatur AL 35602-1209	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Defco Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ionel Marsavela</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address PO Box 1548		<b>Transaction ID: FF060504.0470013</b>	
City State Zip Code Loma Linda CA 92354-1548	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer M & T Trucking Co.	Occupation Truck Driver		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 916.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	196.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. William T. Adams</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 8702 W Wilderness Way		<b>Transaction ID: FF060504.0470028</b>	
City State Zip Code Shreveport LA 71106-6830	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Dale W. Hughes</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 205 Live Oak Ln		<b>Transaction ID: FF060504.0470037</b>	
City State Zip Code Havana FL 32333-1218	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Real Estate Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Virginia Bone</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 305 Park Shore Dr Apt 215		<b>Transaction ID: FF060504.0470039</b>	
City State Zip Code Naples FL 34103-2609	Amount of Each Receipt this Period 26.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	228.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Taylor, Jr.

Mailing Address 7061 Dawnhill Rd

City State Zip Code  
Memphis TN 38135-1857

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 466.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: FF060504.0470060

Amount of Each Receipt this Period  
26.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Beth B. Gray

Mailing Address 2409 Saint Joseph St

City State Zip Code  
Sulphur LA 70663-6153

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: FF060504.0470065

Amount of Each Receipt this Period  
76.00

**C.** Full Name (Last, First, Middle Initial)  
Miss Nicole L. Robinson

Mailing Address 35107 Glosson Cir

City State Zip Code  
Zephyrhills FL 33541-8335

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

Name of Employer Unemployed Occupation Unemployed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1761.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: FF060504.0470075

Amount of Each Receipt this Period  
341.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>443.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Avelina Laxa</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1035 E Golden Ct		<b>Transaction ID: FF060504.0470076</b>	
City Chandler	State AZ	Zip Code 85225-1595	Amount of Each Receipt this Period 301.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Jean N. Spaulding</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 2700 Sycamore Canyon Rd		<b>Transaction ID: FF060504.0470079</b>	
City Santa Barbara	State CA	Zip Code 93108-1916	Amount of Each Receipt this Period 151.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Leonard Peterson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1098 County Road ZZ		<b>Transaction ID: FF060504.0470081</b>	
City Ellison Bay	State WI	Zip Code 54210-9713	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	553.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 138 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Richard A. Walli		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address W5366 County Road 354		<b>Transaction ID:</b> FF060504.0470089	
City Stephenson State MI Zip Code 49887-9007	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 251.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Kumud S. Shah		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 17680 Kedzie Ave Ste 201		<b>Transaction ID:</b> FF060505.0010001	
City Hazel Crest State IL Zip Code 60429-2088	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Doctor	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Donald R. Green		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 3045 Inland Empire Blvd		<b>Transaction ID:</b> FF060505.0080002	
City Ontario State CA Zip Code 91764-4870	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Painting Contractor	Aggregate Year-to-Date ▼ 201.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	501.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 139 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John M. Miller

Mailing Address 201 Kingwood Park

City State Zip Code  
Poughkeepsie NY 12601-5469

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: FF060505.0080006

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Lt. Col. Laird G. Leeder, Jr.

Mailing Address 304 Jule Ingram Rd NE

City State Zip Code  
Milledgeville GA 31061-8958

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0110006

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William T. Adams

Mailing Address 8702 W Wilderness Way

City State Zip Code  
Shreveport LA 71106-6830

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0110020

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Thomas Edward Switajewski, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3911 Southern Oaks Dr Unit 10		<b>Transaction ID:</b> FF060505.0110060
City Fayetteville State NC Zip Code 28314-0998	Amount of Each Receipt this Period 225.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Us Army Occupation Captain	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Robert H. Fasulkey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 664		<b>Transaction ID:</b> FF060505.0120019
City Spotsylvania State VA Zip Code 22553-0664	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 251.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Bill F. Wilson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 547		<b>Transaction ID:</b> FF060505.0120023
City Double Spgs State AL Zip Code 35553-0547	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Employed Occupation Minister	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	725.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John E. Kenney, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 39 Perimeter Ave		<b>Transaction ID:</b> FF060505.0120024
City State Zip Code Standish ME 04084-5741	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Freight Service Provider	
Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kurt J. Strawhecker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 16254 L St		<b>Transaction ID:</b> FF060505.0120030
City State Zip Code Omaha NE 68135-1319	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Consultant	
Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Daniel H. Craig		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 3055		<b>Transaction ID:</b> FF060505.0120031
City State Zip Code Roxboro NC 27573-3055	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Thomas Knight Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Accountant	
Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Marjorie E. Glidden Mailing Address 167 Highland St City Ashland State NH Zip Code 03217-4334 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> FF060505.0120047 Amount of Each Receipt this Period 200.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Elizabeth S. Driscoll Mailing Address 357 Salem Church Rd City Saint Paul State MN Zip Code 55118-4720 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> FF060505.0120065 Amount of Each Receipt this Period 300.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Charles D. Cash Mailing Address 6387 B Camp Bowie 221 Ste. B City Fort Worth State TX Zip Code 76116-5442 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> FF060505.0130002 Amount of Each Receipt this Period 225.00
Name of Employer Computer Sciences Corp. Occupation Senior Computer Scientist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>725.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 143 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard L. Grau		Date of Receipt M M / D D / Y Y Y Y Y 05 / 04 / 2006	
Mailing Address 74 Dutton Mill Rd		<b>Transaction ID:</b> FF060505.0200028	
City Aston	State PA	Zip Code 19014-2934	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer New Way	Occupation Tool & Dye		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. L. L. Woodman, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 05 / 04 / 2006	
Mailing Address PO Box 6435		<b>Transaction ID:</b> FF060505.0210001	
City Corpus Christi	State TX	Zip Code 78466-6435	Amount of Each Receipt this Period 201.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Woodman Investments		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Frank H. Suits, Sr.		Date of Receipt M M / D D / Y Y Y Y Y 05 / 04 / 2006	
Mailing Address 4964 State Route 41		<b>Transaction ID:</b> FF060505.0210017	
City Homer	State NY	Zip Code 13077-9370	Amount of Each Receipt this Period 401.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	627.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 144 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Frank N. Genovese

Mailing Address RR 7 Box 447

City State Zip Code  
Kittanning PA 16201-7537

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

Name of Employer: Genovese Ophthalmic Associates  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1151.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0210022

Amount of Each Receipt this Period  
51.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Buck J. Miller

Mailing Address 4401 Stanhope St

City State Zip Code  
Dallas TX 75205-1664

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

Name of Employer: Self  
Occupation: Rancher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0210036

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Elpidio E. Taveras

Mailing Address 5238 Central Ave

City State Zip Code  
Chattanooga TN 37410-2013

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

Name of Employer: Neighborhood Grocery  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0210041

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	301.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Duane L. Hartman

Mailing Address PO Box 22787

City State Zip Code  
Lincoln NE 68542-2787

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

Name of Employer INFO REQUESTED Occupation Homebuilder

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

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

Transaction ID: FF060505.0210044

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry D. Finuf

Mailing Address 8821 Robinson Ridge Dr

City State Zip Code  
Las Vegas NV 89117-5812

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060505.0220020

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth J. Fedarko

Mailing Address 802 N 22nd Pl Apt 228B

City State Zip Code  
Phoenix AZ 85006-3874

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 261.00

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

Transaction ID: FF060505.0220029

Amount of Each Receipt this Period  
11.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>612.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Donald E. Reichert		Date of Receipt MM / DD / YYYY 05 / 04 / 2006
Mailing Address 901 N Mission St		<b>Transaction ID:</b> FF060505.0220047
City Wenatchee	State WA	Zip Code 98801-1554
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 101.00	
Name of Employer Reichert Nissan Inc.	Occupation Auto - Sales & Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Lisa Stern		Date of Receipt MM / DD / YYYY 05 / 04 / 2006
Mailing Address 2649 NW 48th Ter Apt 137		<b>Transaction ID:</b> FF060505.0220052
City Lauderdale Lakes	State FL	Zip Code 33313-2681
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 16.00	
Name of Employer Unemployed	Occupation Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Berend Friehe		Date of Receipt MM / DD / YYYY 05 / 04 / 2006
Mailing Address 2498 Road S NE		<b>Transaction ID:</b> FF060505.0220082
City Moses Lake	State WA	Zip Code 98837-9539
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 251.00	
Name of Employer Self	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>368.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Albert A. Waggener

Mailing Address 5610 Indian Cir

City State Zip Code  
Houston TX 77056-1006

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0230021

Amount of Each Receipt this Period  
251.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Elaine Zolezzi

Mailing Address 1435 Francisco St

City State Zip Code  
San Francisco CA 94123-2202

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0230023

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth R. Ringbloom

Mailing Address 760 N Frontage Rd

City State Zip Code  
Willowbrook IL 60527-5647

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 821.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0230029

Amount of Each Receipt this Period  
251.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	553.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 148 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Paul P. Arlauckas		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 2528 Mahogany Trl		<b>Transaction ID:</b> FF060505.0230043	
City State Zip Code Manasquan NJ 08736-2125	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Frank J. Rushen		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 204 Amy Ct		<b>Transaction ID:</b> FF060505.0230080	
City State Zip Code Stroudsburg PA 18360-9166	Amount of Each Receipt this Period 251.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Nadine H. Hughes		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 1434 Punahou St Apt 707		<b>Transaction ID:</b> FF060505.0240021	
City State Zip Code Honolulu HI 96822-4729	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	503.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dietrich Kaesgen

Mailing Address 19460 Frazier Dr

City State Zip Code  
Rocky River OH 44116-1727

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

Name of Employer Occupation  
Mtd Production Inc Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060505.0240023

Amount of Each Receipt this Period  
201.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Ruth M. Sceva

Mailing Address 3429 40th Ave W

City State Zip Code  
Seattle WA 98199-1922

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060505.0240030

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert F. Stratton

Mailing Address 6801 Rosemary Ln

City State Zip Code  
Charlotte NC 28210-7018

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060505.0240049

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	353.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Mirta Vargas

Mailing Address 6191 Hawarden Dr

City State Zip Code  
Riverside CA 92506-4525

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

Name of Employer Occupation  
University Of California Professor  
Riverside

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

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

Transaction ID: FF060505.0240068

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Thoma

Mailing Address 2048 18th St

City State Zip Code  
Wyandotte MI 48192-3830

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

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

Transaction ID: FF060505.0240079

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Joline N. Ozanne

Mailing Address 331 Club Way

City State Zip Code  
Wilmington NC 28412-3307

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

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

Transaction ID: FF060505.0240080

Amount of Each Receipt this Period  
236.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	437.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Armen J. Mahdesian		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1420 Sun Valley Rd		<b>Transaction ID:</b> FF060505.0250054
City State Zip Code Solana Beach CA 92075-1649	Amount of Each Receipt this Period 51.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Mohamed Rafiqzaman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 801 Crestview Dr		<b>Transaction ID:</b> FF060505.0250078
City State Zip Code Diamond Bar CA 91765-6118	Amount of Each Receipt this Period 151.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Rafi Systems Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joe D. Ligon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1205 Challenger		<b>Transaction ID:</b> FF060505.0260010
City State Zip Code Lakeway TX 78734-3851	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	302.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard S. Griffith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 3417 Milam St		<b>Transaction ID:</b> FF060505.0260023	
City State Zip Code Houston TX 77002-9531	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Richard S Griffiths	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 860.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kenneth J. Fedarko		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 802 N 22nd Pl Apt 228B		<b>Transaction ID:</b> FF060505.0260027	
City State Zip Code Phoenix AZ 85006-3874	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Donato D'Andrea		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 8 Madeline Dr		<b>Transaction ID:</b> FF060505.0260033	
City State Zip Code Newport RI 02840-1715	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Stanley A. Ryan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 1383		<b>Transaction ID:</b> FF060505.0260046	
City Rainier	State OR	Amount of Each Receipt this Period 10.00	
Zip Code 97048-1383		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William P. Plummer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 3285 Clover Way No 204		<b>Transaction ID:</b> FF060505.0260050	
City Reno	State NV	Amount of Each Receipt this Period 100.00	
Zip Code 89509-4758		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Opal I. Gardner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 11900 Barryknoll Ln Apt 8118		<b>Transaction ID:</b> FF060505.0260053	
City Houston	State TX	Amount of Each Receipt this Period 50.00	
Zip Code 77024-4374		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	160.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Faustino Bernadett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1040 Elm Ave Ste 100		<b>Transaction ID: FF060505.0270013</b>	
City State Zip Code Long Beach CA 90813-3265	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Physician	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Ms. Lois H. Nadeau</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1501 E Magnolia Rd Apt 283		<b>Transaction ID: FF060505.0270016</b>	
City State Zip Code Salina KS 67401-9112	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard E. Carpenter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 17		<b>Transaction ID: FF060505.0280001</b>	
City State Zip Code Brington Jctn MO 64428-0017	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer State Of Iowa Occupation Psychologist	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Alan Cassidy		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 1166		<b>Transaction ID:</b> FF060505.0280003	
City Easton	State MD	Amount of Each Receipt this Period 250.00	
Zip Code 21601-8922		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Oliver A. Pollard, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1587 Westover Ave		<b>Transaction ID:</b> FF060505.0280004	
City Petersburg	State VA	Amount of Each Receipt this Period 250.00	
Zip Code 23805-1203		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Reginald R. Thomas		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 174 Bengueyfield Dr		<b>Transaction ID:</b> FF060505.0290002	
City East Williston	State NY	Amount of Each Receipt this Period 25.00	
Zip Code 11596-1405		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Lachhman Singh

Mailing Address PO Box 1301

City State Zip Code  
Yuba City CA 95992-1301

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

Name of Employer California Agric. Work Force, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0290003

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Buck J. Miller

Mailing Address 4401 Stanhope St

City State Zip Code  
Dallas TX 75205-1664

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

Name of Employer Self Occupation Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0290007

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edwin L. Cooper

Mailing Address 7700 Seawall Blvd Apt 203

City State Zip Code  
Galveston TX 77551-3401

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0290008

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 157 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Irvin J. Larson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 11462 Pala Mesa Dr		<b>Transaction ID:</b> FF060505.0290013
City State Zip Code Northridge CA 91326-1839	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 976.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Vern Tolsma		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 45 Church St		<b>Transaction ID:</b> FF060505.0290019
City State Zip Code Groton CT 06340	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. J. Claude Brannan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address RR 1 Box 238		<b>Transaction ID:</b> FF060505.0290035
City State Zip Code Marietta OK 73448-9731	Amount of Each Receipt this Period 55.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation Rancher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	255.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Edwin L. Cooper</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 7700 Seawall Blvd Apt 203		<b>Transaction ID: FF060505.0300004</b>	
City State Zip Code Galveston TX 77551-3401	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Daniel J. Scheffer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 3727 Georgetown St		<b>Transaction ID: FF060505.0310010</b>	
City State Zip Code Houston TX 77005-2821	Amount of Each Receipt this Period 380.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Scheffer & Associates Inc. Homebuilder			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. William C. Buck</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 274 Hothorpe Ln		<b>Transaction ID: FF060505.0310017</b>	
City State Zip Code Villanova PA 19085-1116	Amount of Each Receipt this Period 505.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation I. D. H. Capital Corp. Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 505.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1085.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Campbell Steward		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 65 Asbury St		<b>Transaction ID:</b> FF060505.0310018
City Topsfield	State MA	Zip Code 01983-1501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Kortec Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Charles M. Sciolaro		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3109 W 118th St		<b>Transaction ID:</b> FF060505.0350004
City Leawood	State KS	Zip Code 66211-3059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer Kansas Heart And Lung Surgery	Occupation Surgeon	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. J. Curtis Brewer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 417 Toland Dr		<b>Transaction ID:</b> FF060505.0350007
City Ft Washington	State PA	Zip Code 19034-1908
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer Burke, Lawton, Brewer & Burke	Occupation Investment Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1002.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William M. Bauman		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 1060 Lagunita Rd		Transaction ID: FF060505.0350024	
City Pasadena	State CA	Zip Code 91105-2224	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 351.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Lois M. Frels		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 25329 1st Ave N		Transaction ID: FF060505.0350026	
City Hillsdale	State IL	Zip Code 61257-9628	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Frels And Associates		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Miss Helen J. Hart		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 807 Kansas Ave		Transaction ID: FF060505.0360002	
City Clarinda	State IA	Zip Code 51632-4703	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self		Occupation Self Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 256.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Lachhman Singh

Mailing Address PO Box 1301

City State Zip Code  
Yuba City CA 95992-1301

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

Name of Employer Occupation  
California Agric. Work Force, Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0360008

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ronald L. Young

Mailing Address 1322 14th Ave

City State Zip Code  
Menominee MI 49858-2746

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

Name of Employer Occupation  
Enstrom Helicopter Corp. Engineer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 351.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0360021

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Lt. Col. Viron E. Bird

Mailing Address 30 NW Greentree Ln

City State Zip Code  
Kansas City MO 64116-1722

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 276.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060505.0360032

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 162 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Marjorie L. Godber		Date of Receipt MM / DD / YYYY 05 / 04 / 2006
Mailing Address 12 Rue Grand Ducal		<b>Transaction ID:</b> FF060505.0360056
City Newport Beach	State CA	Zip Code 92660-5906
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Jay L. Grosfeld		Date of Receipt MM / DD / YYYY 05 / 04 / 2006
Mailing Address 7979 N Meridian St		<b>Transaction ID:</b> FF060505.0360064
City Indianapolis	State IN	Zip Code 46260-2948
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William L. Bruggeman		Date of Receipt MM / DD / YYYY 05 / 04 / 2006
Mailing Address 1681 94th Ln NE		<b>Transaction ID:</b> FF060505.0360068
City Minneapolis	State MN	Zip Code 55449-4324
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1.00	
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 163 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Lowell R. Zitzloff

Mailing Address 5790 Hardscrabble Cir

City State Zip Code  
Minnetrista MN 55364-9007

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

Name of Employer Self Occupation Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

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

**Transaction ID:** FF060505.0360087

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Roland M. Rockwell

Mailing Address 5837 Timber Land Cir

City State Zip Code  
Fitchburg WI 53711-5173

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

**Transaction ID:** FF060505.0370098

Amount of Each Receipt this Period  
1.00

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

Mailing Address 104 Wayne St  
PO Box 86

City State Zip Code  
Howe IN 46746-0086

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

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

**Transaction ID:** FF060505.0380001

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Miklos Weinberger</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 36 S Morris Ln		<b>Transaction ID: FF060505.0380002</b>	
City State Zip Code Scarsdale NY 10583-6016	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Park West Radiology	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Steve Woodruff</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 411 Holmes St		<b>Transaction ID: FF060505.0380045</b>	
City State Zip Code Frankfort KY 40601-2209	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer ATTS Electric Incorporated	Occupation Electrician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Rich G. Conti</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 64 Oak St		<b>Transaction ID: FF060505.0380049</b>	
City State Zip Code Brookville PA 15825-1133	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Omega Logging, Inc.	Occupation Salesman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Punyamurtula S. Kishore		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 470799		<b>Transaction ID:</b> FF060505.0380066	
City Brookline Vlg	State MA	Zip Code 02447-0799	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Preventive Medicine and Associate	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David W. Snyder		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 26 Copeland Ln Apt C		<b>Transaction ID:</b> FF060505.0380075	
City Newport News	State VA	Zip Code 23601-2353	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Nsnn	Occupation Senior Designer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Vernon T. Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 2633 Richardson Dr Apt 2B		<b>Transaction ID:</b> FF060505.0380078	
City Charlotte	State NC	Zip Code 28211-3341	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 166 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lisa Stern

Mailing Address 2649 NW 48th Ter  
Apt 137

City State Zip Code  
Lauderdale Lakes FL 33313-2681

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

Name of Employer Occupation  
Unemployed Unemployed

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 301.00

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

**Transaction ID:** FF060505.0400004

Amount of Each Receipt this Period  
15.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Darby J. Haley

Mailing Address W Highway 302  
PO Box 839

City State Zip Code  
Kermit TX 79745-0839

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

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

**Transaction ID:** FF060505.0450001

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Russell E. Hladik

Mailing Address 205 NE Erickson Ln

City State Zip Code  
Poulsbo WA 98370-9110

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

Name of Employer Occupation  
Retired Retired

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

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

**Transaction ID:** FF060505.0470003

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>285.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Rodger L. Ainsworth		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1950 E Sikorsky St		<b>Transaction ID:</b> FF060505.0490032
City State Zip Code Stockton CA 95206-3902	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2.00
Name of Employer The Flight Center	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 502.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Lytton G. Acree		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 1150		<b>Transaction ID:</b> FF060505.0490034
City State Zip Code Roswell GA 30077-1150	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2.00
Name of Employer Self	Occupation Sculptor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ezra Habtresh		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 9025 Wilshire Blvd Ste 301		<b>Transaction ID:</b> FF060505.0500003
City State Zip Code Beverly Hills CA 90211-1827	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2.00
Name of Employer Ezra Healthcaré, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 502.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Ruth O. Augustine

Mailing Address 50 S Congress St  
# 9

City State Zip Code  
Newtown PA 18940-1906

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

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

Transaction ID: FF060508.0040001

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William H. McAdams

Mailing Address 1428 Pinnacle View Dr NE

City State Zip Code  
Albuquerque NM 87112-6616

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: FF060508.0110001

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Miklos Weinberger

Mailing Address 36 S Morris Ln

City State Zip Code  
Scarsdale NY 10583-6016

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

Name of Employer Park West Radiology Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

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

Transaction ID: FF060508.0140001

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	625.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William L. Bruggeman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1681 94th Ln NE		Transaction ID: FF060508.0140007	
City State Zip Code Minneapolis MN 55449-4324	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John A. Pagin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 104 Wayne St PO Box 86		Transaction ID: FF060508.0150001	
City State Zip Code Howe IN 46746-0086	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Jay L. Grosfeld		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 7979 N Meridian St		Transaction ID: FF060508.0150008	
City State Zip Code Indianapolis IN 46260-2948	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Albert K. Hoover

Mailing Address 356 Arcadia Pl

City State Zip Code  
San Antonio TX 78209-5902

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

Name of Employer Sbc Occupation  
Managing Director - Corp Dev.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: FF060508.0150014

Amount of Each Receipt this Period  
501.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mohammad A. Mirza

Mailing Address 2603 Honeysuckle Walk

City State Zip Code  
Spring TX 77388-5496

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

Name of Employer Global Digital Networks Occupation  
Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: FF060508.0230009

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Chris F. Bidigare, Sr.

Mailing Address 408 Home Ave

City State Zip Code  
Oak Park IL 60302-3705

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

Name of Employer Advantage Mortgage Occupation  
Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: FF060508.0240032

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1251.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Debbie Reynolds

Mailing Address 1355 Restful Ln

City State Zip Code  
Grawn MI 49637-9434

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

Name of Employer Self Occupation Self

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: FF060508.0240073

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark R. Maddrell

Mailing Address 21872 Michigan Ln

City State Zip Code  
Lake Forest CA 92630-1911

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

Name of Employer Boeing Occupation Truck Driver

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

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

Transaction ID: FF060508.0240080

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel J. Zoeller

Mailing Address 1180 Highway 149

City State Zip Code  
Clarksville TN 37040-7050

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: FF060508.0250047

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	785.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 172 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Kenneth J. King</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 15525 Suffolk Ln		<b>Transaction ID: FF060508.0250050</b>	
City State Zip Code Chagrin Falls OH 44022-3985	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Miss Frances G. Middleton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 3285 Jordon Ave		<b>Transaction ID: FF060508.0250055</b>	
City State Zip Code Cowarts AL 36321-5659	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Surgery Center	Occupation Anesthetist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Elinor F. Reitz</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 2229 273rd Ct SE		<b>Transaction ID: FF060508.0250063</b>	
City State Zip Code Sammamish WA 98075-7940	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Lee R. Copeland		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 275 W Herndon Ave		<b>Transaction ID:</b> FF060508.0250079	
City Clovis	State CA	Zip Code 93612-0204	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Peachwood Medical Group	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. J. Richard Grant		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 9182 Belle Fleurs Cv		<b>Transaction ID:</b> FF060508.0260002	
City Germantown	State TN	Zip Code 38139-7802	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Homebuilder		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Dale Farlow		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 4125 Walker Ave Ste D Ste D		<b>Transaction ID:</b> FF060508.0270001	
City Greensboro	State NC	Zip Code 27407-1342	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Councilman Farlow & Co. LLP	Occupation C.P.A.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 174 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Frank Elk

Mailing Address 319 Woodlomond Way

City State Zip Code  
Huntington WV 25705-3255

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

Name of Employer U-s Equipment Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

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

Transaction ID: FF060508.0280003

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Eugene B. Canfield

Mailing Address PO Box 2200

City State Zip Code  
Jamestown NY 14702-2200

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: FF060508.0280004

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Jeannette D. Germann

Mailing Address 4170 Harrodsburg Rd

City State Zip Code  
Danville KY 40422-8606

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

Name of Employer Maple Lea Farm Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

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

Transaction ID: FF060508.0290002

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 175 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Larry B. Jones

Mailing Address PO Box 8

City Paris State IL Zip Code 61944-0008

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

Name of Employer Jones And Jones Law Offices Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** FF060508.0290004

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Erin Patton

Mailing Address 1285 Avenue Of The Americas Fl 35

City New York State NY Zip Code 10019-6028

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

Name of Employer The Mastermind Group Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** FF060508.0300001

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Janice Haupt

Mailing Address 102 Skyline Dr Skyline Steel Inc

City Arlington State WI Zip Code 53911-9505

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

Name of Employer Skyline Steel Inc. Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** FF060508.0300004

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 176 / 2352</span> (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Nancy E. Parsons Mailing Address 3015 S White Oak Dr City State Zip Code Springfield MO 65809-3741 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> FF060508.0300005 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Cdr. Assessment Group Inc. President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Robert T. Wong Mailing Address 111 New Montgomery St Ste 500 City State Zip Code San Francisco CA 94105-3617 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> FF060508.0300014 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Ags Inc. Engineer Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Nathan Becker Mailing Address 350 Parnassus Ave Ste 707 City State Zip Code San Francisco CA 94117-3621 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> FF060508.0300023 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Becker Nathan MD Inc. CEO Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 5500.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James W. Dodd

Mailing Address 1140 Oak Grove Rd

City State Zip Code  
Dickson TN 37055-4135

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

Name of Employer Occupation  
Blue Eagle Express Inc. Truck Driver

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

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

**Transaction ID:** FF060508.0300025

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark R. Ricks

Mailing Address 391 W 1200 N

City State Zip Code  
Felt ID 83424-5109

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

Name of Employer Occupation  
Triple R Ranch Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

**Transaction ID:** FF060508.0300028

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald E. Robinson

Mailing Address 2582 Club Ct

City State Zip Code  
Madisonville KY 42431-3868

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

Name of Employer Occupation  
Madisonville Tire & Retreading Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

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

**Transaction ID:** FF060508.0300029

Amount of Each Receipt this Period  
500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 178 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Joan L. O'Donnell

Mailing Address 820 Steele Dr

City State Zip Code  
Brea CA 92821-2227

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 606.00

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

Transaction ID: FF060508.0320021

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. George E. Safiol

Mailing Address 64 Juniper Rd

City State Zip Code  
Weston MA 02493-1358

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

Name of Employer Self Occupation Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: FF060508.0330010

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rosalie M. Cornell

Mailing Address 1010 Scott Park Dr  
Apt 302

City State Zip Code  
Iowa City IA 52245-3979

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 566.00

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

Transaction ID: FF060508.0330017

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 215.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Truett W. Flacher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 702 E Grace St		Transaction ID: FF060508.0330020	
City State Zip Code Brownfield TX 79316-3559	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		Transaction ID: FF060508.0330031	
City State Zip Code Pasadena CA 91106-3252	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		Transaction ID: FF060508.0330032	
City State Zip Code Pasadena CA 91106-3252	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William E. Guy

Mailing Address 990 E Del Mar Blvd  
# 203

City Pasadena State CA Zip Code 91106-3252

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2157.00

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

Transaction ID: FF060508.0330033

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Nasser Mohrah

Mailing Address 181 County St

City New Bedford State MA Zip Code 02740-4713

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

Name of Employer Self Occupation Dentist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: FF060508.0330034

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Sabino Farinaccia

Mailing Address 852 59th St

City Brooklyn State NY Zip Code 11220-3612

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

Name of Employer None Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
326.00

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

Transaction ID: FF060508.0330037

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **195.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Alfred Alan Haley

Mailing Address PO Box 1168  
# 177

City Barstow State CA Zip Code 92312-1168

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

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

Transaction ID: FF060508.0330047

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Henry H. Mauz, Jr.

Mailing Address 1608 Viscaino Rd

City Pebble Beach State CA Zip Code 93953-3303

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 787.00

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

Transaction ID: FF060508.0330049

Amount of Each Receipt this Period  
195.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert C. Coats

Mailing Address 4211 Garibaldi Ave

City Jacksonville State FL Zip Code 32210-8513

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

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

Transaction ID: FF060508.0330055

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	395.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 182 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert C. McGlinchey

Mailing Address 101 2nd St  
Apt 14

City State Zip Code  
Los Altos CA 94022-2749

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: FF060508.0330057

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lionel G. Porter

Mailing Address 1034 Vermilion St

City State Zip Code  
Breux Bridge LA 70517-8501

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1126.00

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

Transaction ID: FF060508.0330058

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Atlee J. Reeb

Mailing Address 665 S Santa Clara Ave

City State Zip Code  
New Braunfels TX 78130-5708

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: FF060508.0350011

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gerald J. Grigone

Mailing Address 11951 Bardmont Dr

City State Zip Code  
Saint Louis MO 63126-2901

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

Name of Employer Occupation  
C.j. Thomas Co Insurance Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: FF060508.0350025

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard Kavanagh

Mailing Address 401 Ashley Dr

City State Zip Code  
New Lenox IL 60451-1165

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

Name of Employer Occupation  
Dykema Gossett Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: FF060508.0350027

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Zeyi Chen

Mailing Address 68 Colleton Dr

City State Zip Code  
Charleston SC 29407-7301

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

Name of Employer Occupation  
Skin Therapy Center Medical Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

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

Transaction ID: FF060508.0360013

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John S. Bunton

Mailing Address 780 Mountain Rd

City Parsonsfield State ME Zip Code 04047-6821

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: FF060508.0370001

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kussay Zubi

Mailing Address 11911 S Saginaw St

City Grand Blanc State MI Zip Code 48439-1401

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

Name of Employer Grand-B Fuel Stop Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: FF060508.0370002

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Harry McDowell

Mailing Address PO Box 530095

City Birmingham State AL Zip Code 35253-0095

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

Name of Employer Dipiazza, Larocca, Mcdone-ll & Co. Occupation Cpa

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: FF060508.0370003

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Reid T. Culberson

Mailing Address 4708 SE Mizner Pl

City State Zip Code  
Stuart FL 34997-2173

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: FF060508.0400005

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Harold D. Lankfrod

Mailing Address 9 Park Cir

City State Zip Code  
Mexico MO 65265-2331

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

Name of Employer Info Requested Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: FF060508.0400013

Amount of Each Receipt this Period  
26.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Grace Liney

Mailing Address 1478 N Gatewood Ave

City State Zip Code  
Palatine IL 60067-8617

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

Name of Employer St Francis Hospital Occupation Rn

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: FF060508.0400014

Amount of Each Receipt this Period  
301.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	428.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Salim S. Al-Salem

Mailing Address 490 Forest Ave

City State Zip Code  
Paramus NJ 07652-4704

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

Name of Employer Occupation  
Ny Med College Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

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

Transaction ID: FF060508.0400021

Amount of Each Receipt this Period  
51.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Claire E. Abts

Mailing Address 1657 Huntington Dr  
Ste D125

City State Zip Code  
Duarte CA 91010-2583

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

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

Transaction ID: FF060508.0400046

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James B. Cummins

Mailing Address PO Box 160

City State Zip Code  
Sand Springs OK 74063-0160

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

Name of Employer Occupation  
Keystone Equipment Company Corporate Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: FF060508.0400055

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>352.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 187 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Juan Y. Forster

Mailing Address 12245 Circula Panorama

City State Zip Code  
Santa Ana CA 92705-1376

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

Name of Employer Occupation  
Huntway Ref. Company Consultant

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

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: FF060508.0400070

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. E. P. Charlton, II

Mailing Address 1030 Parrott Dr

City State Zip Code  
Hillsborough CA 94010-7401

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 252.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: FF060508.0410005

Amount of Each Receipt this Period  
151.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Mary K. Morrison

Mailing Address 2400 Cedar Point Dr

City State Zip Code  
Wayzata MN 55391-2618

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

Name of Employer Occupation  
Self Self

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: FF060508.0410021

Amount of Each Receipt this Period  
301.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>652.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Col. William W. White</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address <b>PO Box 117</b>		<b>Transaction ID: FF060508.0410046</b>	
City <b>Salem</b>	State <b>WI</b>	Zip Code <b>53168-0117</b>	Amount of Each Receipt this Period 401.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation <b>Real Estate</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1701.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Wilhelmine E. Long</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address <b>1817 W Norwood St</b>		<b>Transaction ID: FF060508.0410048</b>	
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60660-2311</b>	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation <b>Retired</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 701.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Wells E. Wescott</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address <b>1154 E Granvia Valmonte</b>		<b>Transaction ID: FF060508.0410058</b>	
City <b>Palm Springs</b>	State <b>CA</b>	Zip Code <b>92262-6177</b>	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation <b>INFO REQUESTED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	553.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Beverly K. Allen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 163 S County Road 31		<b>Transaction ID:</b> FF060508.0420025
City State Zip Code Berthoud CO 80513-8901	Amount of Each Receipt this Period 151.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Budge Assist Livining	Occupation Registered Nurse	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Creed V. Brattain		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 61 NE Columbia Blvd		<b>Transaction ID:</b> FF060508.0420028
City State Zip Code Portland OR 97211-1413	Amount of Each Receipt this Period 101.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. George Louis Truslove		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 25433 213th Ave SE Apt 48		<b>Transaction ID:</b> FF060508.0420031
City State Zip Code Maple Valley WA 98038-7537	Amount of Each Receipt this Period 51.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	303.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 190 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Sue M. Cannon

Mailing Address 6420 W Lakeridge Rd

City State Zip Code  
**Lakewood CO 80227-3909**

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 05 / 2006**

**Transaction ID: FF060508.0420063**

Amount of Each Receipt this Period  
**750.00**

**B.** Full Name (Last, First, Middle Initial)  
Ms. Earline Cratch

Mailing Address 4240 Olivia Ave

City State Zip Code  
**Royal Oak MI 48073-1602**

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 05 / 2006**

**Transaction ID: FF060508.0430001**

Amount of Each Receipt this Period  
**201.00**

**C.** Full Name (Last, First, Middle Initial)  
Ms. Nancy B. Rowland

Mailing Address RR 1 Box 72

City State Zip Code  
**Wilburton OK 74578-9703**

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **202.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 05 / 2006**

**Transaction ID: FF060508.0430008**

Amount of Each Receipt this Period  
**202.00**

**SUBTOTAL** of Receipts This Page (optional) ..... **1153.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Barbara A. Walters

Mailing Address 21752 E 2100 Rd  
Bldg 1

City State Zip Code  
Lacygne KS 66040-9188

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: FF060508.0430027

Amount of Each Receipt this Period  
51.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John R. Newlin

Mailing Address 420 Stoneybrook Dr

City State Zip Code  
Kettering OH 45429-5354

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

Name of Employer Occupation  
Self Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: FF060508.0430034

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert F. Fleming, Jr.

Mailing Address 3909 Valley Dr

City State Zip Code  
Midland MI 48640-6602

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: FF060508.0430054

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	203.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Edo S. Cecic		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 5230 N Rose St		<b>Transaction ID:</b> FF060508.0430064	
City State Zip Code Rosemont IL 60018-5413	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Employed	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Norbert Bennett		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 8376 Olean Rd		<b>Transaction ID:</b> FF060508.0430084	
City State Zip Code Holland NY 14080-9514	Amount of Each Receipt this Period 301.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Tara Cares	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Lucius F. Sinks		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address PO Box 406		<b>Transaction ID:</b> FF060508.0480003	
City State Zip Code Ivy VA 22945-0406	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	353.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Eric J. Swanstrom

Mailing Address 540 1st St

City State Zip Code  
Lemont IL 60439-4102

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

Name of Employer Occupation  
Pegasus Biologics Medical Salesman

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 452.00

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

**Transaction ID:** FF060508.0480004

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Arthur W. Klinke

Mailing Address 233 Berkley Ave

City State Zip Code  
Battle Creek MI 49017-4543

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 201.00

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

**Transaction ID:** FF060508.0480007

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William A. Forbes

Mailing Address 5905 Echingham Dr

City State Zip Code  
Virginia Bch VA 23464-1557

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 301.00

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

**Transaction ID:** FF060508.0480028

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Hubert C. Huh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address PO Box 266		<b>Transaction ID: FF060508.0490005</b>	
City State Zip Code Bryn Mawr PA 19010-0266	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Prescott, Forbes, Morgan, Hub Assoc.	Occupation Chairman, Managing Partner, Chief Exec		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2701.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Roy Knipper, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 441-19 White Tail Dr		<b>Transaction ID: FF060508.0490058</b>	
City State Zip Code Aurora OH 44202-7514	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Lois M. Hudson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 320 Ruby Ave		<b>Transaction ID: FF060508.0490062</b>	
City State Zip Code Newport Beach CA 92662-1130	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Robert F. Carter, Jr.

Mailing Address 231 Front Beach Dr

City State Zip Code  
Ocean Springs MS 39564-4516

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060508.0500002

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Edward J. Schneider

Mailing Address 373 Pelican Way

City State Zip Code  
Delray Beach FL 33483-8042

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

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

Transaction ID: FF060508.0500005

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James G. Hornsby

Mailing Address PO Box EG

City State Zip Code  
Livingston AL 35470-0769

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

Name of Employer West Alabama Converting Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060508.0500008

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Ronald J. Bateman</b>		Date of Receipt MM / DD / YYYY 05 / 05 / 2006
Mailing Address 1601 E Olympic Blvd Ste 312		Transaction ID: FF060508.0500037
City Los Angeles	State CA	Zip Code 90021-1942
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer Ronald J. Bateman Group, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. James M. Lally</b>		Date of Receipt MM / DD / YYYY 05 / 05 / 2006
Mailing Address 2496 Sierra Dr		Transaction ID: FF060508.0500057
City Upland	State CA	Zip Code 91784-1182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Claude Ezell</b>		Date of Receipt MM / DD / YYYY 05 / 05 / 2006
Mailing Address 169 Herrington Rd		Transaction ID: FF060508.0500065
City Winnsboro	State LA	Zip Code 71295-4885
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Virginia M. Archer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 1620 Windswept Dr		<b>Transaction ID:</b> FF060508.0500081	
City State Zip Code Saint George UT 84790-4484	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Margaret M. Ruskin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 333 E Caribbean Ln		<b>Transaction ID:</b> FF060508.0530002	
City State Zip Code Phoenix AZ 85022-3637	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 611.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert D. Hillmann		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 3641 Bryn Mawr Dr		<b>Transaction ID:</b> FF060508.0670001	
City State Zip Code Dallas TX 75225-7215	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1251.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. R. J. Ochsner</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 1463 Paseo Nogales Rd		<b>Transaction ID: FF060508.0670002</b>	
City State Zip Code Alamo CA 94507-1137	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. John A. Kerner</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 2924 Stanford Ave		<b>Transaction ID: FF060508.0670003</b>	
City State Zip Code Dallas TX 75225-7801	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Kimberly J. McWaters</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 5761 W Pinnacle Hill Dr		<b>Transaction ID: FF060508.0670004</b>	
City State Zip Code Glendale AZ 85310-3632	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Richard Clark

Mailing Address 5875 Hickory Hollow Ln

City State Zip Code  
 Doylestown PA 18901-9413

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

**Transaction ID:** FF060508.0670005

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Robert S. Ross, Jr.

Mailing Address 4603 Kenmore Dr NW

City State Zip Code  
 Washington DC 20007-1914

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** FF060508.0670006

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
 Mr. Matthew J. Steck

Mailing Address 4462 Dunmore Dr

City State Zip Code  
 Harrisburg PA 17112-1552

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

**Transaction ID:** FF060508.0670007

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Gretchen W. Rapp</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 637 Olde Ventura Farm Rd		<b>Transaction ID: FF060508.0670008</b>	
City State Zip Code Hummelstown PA 17036-8501	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. John Dong</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 4201 Victory Pointe Dr		<b>Transaction ID: FF060508.0670009</b>	
City State Zip Code Mt Pleasant SC 29466-6931	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Jean Gingras Denton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 15 9th St SE		<b>Transaction ID: FF060508.0670010</b>	
City State Zip Code Washington DC 20003-1333	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Diane C. Nau</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 812 E Capitol St NE		<b>Transaction ID: FF060508.0670011</b>	
City State Zip Code Washington DC 20003-1373	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Computer Consultant	Aggregate Year-to-Date ▼ 10000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Ronald O. Perelman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 35 E 62nd St		<b>Transaction ID: FF060508.0670012</b>	
City State Zip Code New York NY 10021-8014	Amount of Each Receipt this Period 15000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 15000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Ms. Ira Leon Rennert</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 30 Rockefeller Plz 42nd Fl		<b>Transaction ID: FF060508.0670013</b>	
City State Zip Code New York NY 10112-0002	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	30000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Bradley S. Clark		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1955 Pizarro Ln		<b>Transaction ID:</b> FF060508.0670014	
City Escondido	State CA	Amount of Each Receipt this Period 500.00	
Zip Code 92026-1741			
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Frank W. Pace		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1593 Hillstone Ave		<b>Transaction ID:</b> FF060508.0670015	
City Escondido	State CA	Amount of Each Receipt this Period 500.00	
Zip Code 92029-4331			
FEC ID number of contributing federal political committee. C			
Name of Employer General Atomics		Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Terry W. Hamby		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address PO Box 688		<b>Transaction ID:</b> FF060508.0670016	
City Hopkinsville	State KY	Amount of Each Receipt this Period 2500.00	
Zip Code 42241-0688			
FEC ID number of contributing federal political committee. C			
Name of Employer Bmar & Associates Inc.		Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Walter Gezari</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address PO Box 383		<b>Transaction ID: FF060508.0750001</b>	
City State Zip Code Calverton NY 11933-0383	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Stidd Systems	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael T. Victor</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 4851 Wolf Rd		<b>Transaction ID: FF060508.0760001</b>	
City State Zip Code Erie PA 16505-1337	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Milford P. Christenson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 9700 Indianapolis Blvd		<b>Transaction ID: FF060508.0760002</b>	
City State Zip Code Highland IN 46322-2619	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Christensen Chevrolet	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	55000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Bruce Soll		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 141 S Drexel Ave		<b>Transaction ID:</b> FF060508.0760003	
City State Zip Code Bexley OH 43209-1739	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The Limited Inc.	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ronald L. Simek		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 562		<b>Transaction ID:</b> FF060508.0770001	
City State Zip Code Genoa NV 89411-0562	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Canyon Creek Realty	Occupation Land Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Sabino Farinaccia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 852 59th St		<b>Transaction ID:</b> FF060509.0080002	
City State Zip Code Brooklyn NY 11220-3612	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	26001.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Arthur W. Klink

Mailing Address 233 Berkley Ave

City State Zip Code  
Battle Creek MI 49017-4543

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060509.0190002

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Donald L. Eakin

Mailing Address 128 Sandpiper Cir

City State Zip Code  
Jupiter FL 33477-8433

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

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

Transaction ID: FF060509.0200003

Amount of Each Receipt this Period  
301.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Lucius F. Sinks

Mailing Address PO Box 406

City State Zip Code  
Ivy VA 22945-0406

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060509.0200004

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	501.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Clarice Hunter		Date of Receipt MM / DD / YYYY 05 / 05 / 2006
Mailing Address 423 Halsey St Fl 1		<b>Transaction ID:</b> FF060509.0210006
City Brooklyn	State NY	Zip Code 11233-1014
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Roberts & Flora, Inc.	Occupation Clerk	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 678.50	

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Hubert C. Huh		Date of Receipt MM / DD / YYYY 05 / 05 / 2006
Mailing Address PO Box 266		<b>Transaction ID:</b> FF060509.0210008
City Bryn Mawr	State PA	Zip Code 19010-0266
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Prescott, Forbes, Morgan, Hub Assoc.	Occupation Chairman, Managing Partner, Chief Exec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2701.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Robert F. Carter, Jr.		Date of Receipt MM / DD / YYYY 05 / 05 / 2006
Mailing Address 231 Front Beach Dr		<b>Transaction ID:</b> FF060509.0210011
City Ocean Springs	State MS	Zip Code 39564-4516
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 208 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edward J. Schneider

Mailing Address 373 Pelican Way

City State Zip Code  
Delray Beach FL 33483-8042

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

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

Transaction ID: FF060509.0210013

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Elidio Curi

Mailing Address 6714 Central Avenue Pike Ste J

City State Zip Code  
Knoxville TN 37912-1424

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

Name of Employer Self Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

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

Transaction ID: FF060509.0210016

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ken Nelson

Mailing Address 3113 Fairweather Pl

City State Zip Code  
Hunts Point WA 98004-1035

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

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

Transaction ID: FF060509.0210019

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Eric J. Swanstrom Mailing Address 540 1st St City Lemont State IL Zip Code 60439-4102 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> FF060509.0210022 Amount of Each Receipt this Period 101.00
Name of Employer Pegasus Biologics Occupation Medical Salesman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 452.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Russell A. Frew, Sr. Mailing Address 5904 Kenwood Ave City Baltimore State MD Zip Code 21237-2016 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> FF060509.0230003 Amount of Each Receipt this Period 50.00
Name of Employer INFO REQUESTED Occupation INFO REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary E. Arthur Mailing Address 459 Peninsula Dr City Hot Springs State AR Zip Code 71901-8701 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> FF060509.0280020 Amount of Each Receipt this Period 100.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>251.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 210 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James Ball

Mailing Address 1008 Montvale Station Rd

City State Zip Code  
Maryville TN 37803-5808

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

Name of Employer Occupation  
Cookville Medical Center Rn

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

**Transaction ID:** FF060509.0280036

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Nelse Davis

Mailing Address 4490 Eldorado Pkwy  
Apt 717

City State Zip Code  
McKinney TX 75070-3878

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

**Transaction ID:** FF060509.0290061

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. George A. West

Mailing Address PO Box 2137

City State Zip Code  
Belle Glade FL 33430-7137

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

**Transaction ID:** FF060509.0310017

Amount of Each Receipt this Period  
65.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>365.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Agnes T. Hansen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2805 S 125th St Apt 308		<b>Transaction ID:</b> FF060509.0310027
City State Zip Code Seattle WA 98168-2493	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. June Stutzman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 100 McNamee Ln Apt 204		<b>Transaction ID:</b> FF060509.0310058
City State Zip Code Rising Sun MD 21911-2261	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Carl A. Neff		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 8187 State Route 43		<b>Transaction ID:</b> FF060509.0320039
City State Zip Code Streetsboro OH 44241-5864	Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Truett W. Flacher		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 702 E Grace St		<b>Transaction ID:</b> FF060509.0320073	
City State Zip Code Brownfield TX 79316-3559	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Sim S. Capon		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 3250 E Sun Cloud PI		<b>Transaction ID:</b> FF060509.0320092	
City State Zip Code Tucson AZ 85718-1375	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Anna P. Hangartner		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 2825 Stein Blvd		<b>Transaction ID:</b> FF060509.0340024	
City State Zip Code Eau Claire WI 54701-6284	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Rheba L. Fitzner

Mailing Address 2207 Wibben Ave

City State Zip Code  
Louisville KY 40205-2124

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0340035

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Alma M. Lasater

Mailing Address 40 Blythewood Dr

City State Zip Code  
Greenville SC 29607-1202

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0340069

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Helen A. Mahurin

Mailing Address 501 W 107th St Apt 211

City State Zip Code  
Kansas City MO 64114-5913

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0340080

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 214 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Josephine D. Bautista

Mailing Address PO Box 639

City Delano State CA Zip Code 93216-0639

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

Name of Employer J & P General Office Services Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0350026

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Harry Lee Walton

Mailing Address 206 Red Riding Hood Trl

City Lookout Mtn State GA Zip Code 30750-2528

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0350051

Amount of Each Receipt this Period  
 150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jeanne Hedberg

Mailing Address 76 Wilbur Rd

City Lincoln State RI Zip Code 02865-4318

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0360021

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Judith M. Dorr		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2224 Baron Dr E Apt. 204		<b>Transaction ID:</b> FF060509.0360030	
City State Zip Code Wisconsin Rapids WI 54994-2233	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Lcdr Milburn K. Freer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 4226 Utah St Apt 20		<b>Transaction ID:</b> FF060509.0360055	
City State Zip Code San Diego CA 92104-1857	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 426.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John L. Ingersoll		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 52 Ryders Ln		<b>Transaction ID:</b> FF060509.0370016	
City State Zip Code Wilton CT 06897-1721	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	425.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Sunya L. Westkaemper		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 3790 Whitman Cir		Transaction ID: FF060509.0370051	
City State Zip Code Carmel CA 93923-8326	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. George M. Cunyus		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 7371 FM 2204		Transaction ID: FF060509.0380039	
City State Zip Code Kilgore TX 75662-8249	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Helen M. Pittinger		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 4513 Wilmslow Rd		Transaction ID: FF060509.0390032	
City State Zip Code Baltimore MD 21210-2527	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1141.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	585.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jerome F. Hoelscher

Mailing Address 3702 County Road 125

City State Zip Code  
Garden City TX 79739-2609

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

Name of Employer Self Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0390054

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Patricia Rosser

Mailing Address 188 S Hill Dr

City State Zip Code  
Westampton NJ 08060-5728

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0400004

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joanne Kim Phan

Mailing Address 3773 University Dr Apt 207

City State Zip Code  
Irvine CA 92612-4668

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1793.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0400026

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>330.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Louise W. Henry		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 633 Spray Ave		<b>Transaction ID:</b> FF060509.0400044	
City Beachwood	State NJ	Amount of Each Receipt this Period 500.00	
Zip Code 08722-4731		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 1100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Alan E. Burch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1025 Maine Ave		<b>Transaction ID:</b> FF060509.0410078	
City Hainesport	State NJ	Amount of Each Receipt this Period 40.00	
Zip Code 08036-2914		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 541.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Emmett M. Upshaw, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1231 N Point Farm Rd		<b>Transaction ID:</b> FF060509.0430034	
City King William	State VA	Amount of Each Receipt this Period 50.00	
Zip Code 23086-2820		FEC ID number of contributing federal political committee. C	
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 201.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	590.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 219 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. B. B. Munford, III

Mailing Address 1 James Ctr  
Fl. 11

City Richmond State VA Zip Code 23219-4063

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

Name of Employer Davenport & Co Occupation Stock Broker

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0430042

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Virginia I. Dahlberg-Heberling

Mailing Address 3226 11th Ave

City Moline State IL Zip Code 61265-2326

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0440048

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Elizabeth G. Anderson

Mailing Address 3324 Irving Ave S

City Minneapolis State MN Zip Code 55408-3320

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 876.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0440083

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00

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

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

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

FOR LINE NUMBER: PAGE 220 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Joan M. Hardenbergh  
 Mailing Address 8805 Leeshire Ln  
 City Raleigh State NC Zip Code 27615-6568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6  
**Transaction ID:** FF060509.0440092  
 Amount of Each Receipt this Period  
 150.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Marcia L. Devlin  
 Mailing Address 125 E Cuttriss St  
 City Park Ridge State IL Zip Code 60068-2722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer R & J Gamz Farms Occupation Property Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6  
**Transaction ID:** FF060509.0450016  
 Amount of Each Receipt this Period  
 75.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Tauba Sass  
 Mailing Address 80 Bear Creek Ln  
 City Asheville State NC Zip Code 28806-6801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6  
**Transaction ID:** FF060509.0450047  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Alice N. Harnett

Mailing Address 402 W Carolina Ave

City State Zip Code  
Summerville SC 29483-4361

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0450060

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Marcia Lisle

Mailing Address 16 Redonda

City State Zip Code  
Irvine CA 92620-1954

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0450079

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joe D. Ligon

Mailing Address 1205 Challenger

City State Zip Code  
Lakeway TX 78734-3851

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0460039

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	625.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 222 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William F. Turner

Mailing Address 1451 Rimpau Ave  
Ste 108

City State Zip Code  
Corona CA 92879-7521

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

Name of Employer Self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060509.0470031

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Edgar Horndt

Mailing Address 4128 Highway 71

City State Zip Code  
Columbus TX 78934-4902

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 476.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060509.0470056

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marjorie B. Abshire

Mailing Address 6111 Haley Ln

City State Zip Code  
Fort Worth TX 76132-3876

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060509.0480041

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 223 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard E. Helling		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2462 Apache Dr		<b>Transaction ID:</b> FF060509.0490023	
City Melbourne	State FL	Amount of Each Receipt this Period 100.00	
Zip Code 32935-2611		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 265.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Jane P. Youngk		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 8208 Cedar Crest Ln		<b>Transaction ID:</b> FF060509.0490043	
City Suffolk	State VA	Amount of Each Receipt this Period 25.00	
Zip Code 23436-1204		FEC ID number of contributing federal political committee. C	
Name of Employer Self	Occupation Real Estate	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Betty N. Nininger		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 8309 Nininger Rd		<b>Transaction ID:</b> FF060509.0490068	
City Bristol	State VA	Amount of Each Receipt this Period 100.00	
Zip Code 24202-5632		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 224 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gene Kimmel

Mailing Address 9615 Boulevard Dr

City Highland State IN Zip Code 46322-3048

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0500025

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Patrica F. Lurye

Mailing Address 32 Woodside Dr

City Warwick State NY Zip Code 10990-1038

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

Name of Employer Ped. Pharmacy Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0500079

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James A. Kelly

Mailing Address 450 Crestview Cir

City Montevallo State AL Zip Code 35115-3938

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0510027

Amount of Each Receipt this Period  
 50.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth Upham

Mailing Address 1108 Hymettus Ct

City Raleigh State NC Zip Code 27607-4176

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0520022

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Rebecca S. Gale

Mailing Address 3895 Kenwood Dr

City Beaumont State TX Zip Code 77706-3714

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

Name of Employer Self Occupation Investment

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0520023

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Elouise Campbell

Mailing Address 28 Los Amigos

City Harlingen State TX Zip Code 78552-9024

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

Name of Employer Retired Occupation Investment

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0520044

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 226 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Patricia A. Mc Gahan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1106 Wisconsin Ave		<b>Transaction ID: FF060509.0530012</b>	
City Windsor	State IL	Zip Code 61957-1131	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Louise Dawson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 134 Stuart Dr		<b>Transaction ID: FF060509.0530018</b>	
City Winchester	State VA	Zip Code 22602-5115	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ramon E. Chalkley, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1606 Pope Ave		<b>Transaction ID: FF060509.0530019</b>	
City Richmond	State VA	Zip Code 23227-3754	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 227 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Betty O. Williamson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 401 W Hillwood Dr		<b>Transaction ID: FF060509.0530024</b>	
City State Zip Code Nashville TN 37205-1340	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 226.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Patrick Herriman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 41650 Riveroaks Dr		<b>Transaction ID: FF060509.0530086</b>	
City State Zip Code Plymouth MI 48170-4324	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mrs. Margaret M. Turnquist</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 5394 N Via Sempreverde		<b>Transaction ID: FF060509.0550020</b>	
City State Zip Code Tucson AZ 85750-5971	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 228 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Martha P. Giese		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 20 Framingham Ln		<b>Transaction ID:</b> FF060509.0550048	
City Pittsford	State NY	Zip Code 14534-1048	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1351.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Margaret B. Cray		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 3 Hampton Rd		<b>Transaction ID:</b> FF060509.0560003	
City Ewing	State NJ	Zip Code 08638-1413	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Elisa Hahl-Harwick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 7900 Martingale Ln		<b>Transaction ID:</b> FF060509.0560031	
City Las Vegas	State NV	Zip Code 89123-2019	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Mft/sac		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jose Saud, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 7 Reserve Ave Fl. 1		<b>Transaction ID:</b> FF060509.0570010	
City Jersey City	State NJ	Zip Code 07307-4402	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Bruce Duwayne. Roen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 301		<b>Transaction ID:</b> FF060509.0570028	
City Lake Park	State MN	Zip Code 56554-0301	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hawley School District		Occupation Sergeant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Robert B. Adams		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2051 Fernway Dr		<b>Transaction ID:</b> FF060509.0580015	
City Montgomery	State AL	Zip Code 36111-1611	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Calvin M. Oliver

Mailing Address 1722 Tanner Bridge Rd

City State Zip Code  
Jefferson Cty MO 65101-2846

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0580085

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jimmy D. Dicketts

Mailing Address 9391 California Ave Spc 34

City State Zip Code  
Riverside CA 92503-3221

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

Name of Employer Ace Smog Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0580093

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Morris R. Pieper

Mailing Address 202 W Lincoln St

City State Zip Code  
Mount Morris IL 61054-1416

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0590060

Amount of Each Receipt this Period  
100.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 231 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Genevieve E. Below		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1236 Bentley Dr		<b>Transaction ID:</b> FF060509.0610002	
City Naples	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 34110-8648		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 501.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Kathryn Cheek		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 5001 Clonmel Rd		<b>Transaction ID:</b> FF060509.0610004	
City Nashville	State TN	Amount of Each Receipt this Period 250.00	
Zip Code 37220-1501		FEC ID number of contributing federal political committee. C	
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Marilyn James		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1400 NE 48th St		<b>Transaction ID:</b> FF060509.0610007	
City Vancouver	State WA	Amount of Each Receipt this Period 100.00	
Zip Code 98663-3631		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 232 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Albert N. Cecil, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2457 Lakeview Cir		<b>Transaction ID:</b> FF060509.0610015	
City Arlington	State TX	Zip Code 76013-3327	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Marjorie Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 6 Huckleberry Ln		<b>Transaction ID:</b> FF060509.0610024	
City Augusta	State ME	Zip Code 04330-6022	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Leon W. Helmly, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1002 Eustis Dr		<b>Transaction ID:</b> FF060509.0610043	
City Augusta	State GA	Zip Code 30904-3123	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Howard W. Cole		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address PO Box 474		Transaction ID: FF060509.0620031
City State Zip Code Leakey TX 78873-0474	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Elizabeth C. Collinson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 5 Sweetgrass Ln		Transaction ID: FF060509.0620074
City State Zip Code Rolling Hills Esta CA 90274-5134	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Prentice C. Crawford		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 207 Whitley Ave		Transaction ID: FF060509.0630009
City State Zip Code Stanford KY 40484-1448	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Rr Donnolloy & Sons	Occupation Machine Line Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 234 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard B. Crouse

Mailing Address 1154 Woodland Terrace Trl

City State Zip Code  
Altamonte Springs FL 32714-1807

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

Name of Employer Occupation  
Gvc Financial Inc. Business Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0630012

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Wesley K. Nails

Mailing Address 7146 Estero Blvd  
Apt 616

City State Zip Code  
Ft Myers Bch FL 33931-4716

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0630025

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Mohler

Mailing Address 5202 Avenida Despacio

City State Zip Code  
Laguna Woods CA 92637-1809

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1605.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0630089

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 235 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Judy M. Pavlick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 780 Goodrich Ave		<b>Transaction ID:</b> FF060509.0640024	
City State Zip Code Saint Paul MN 55105-3343	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Owner	Aggregate Year-to-Date ▼ 650.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Barbara L. Betts		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 714 Harrison St		<b>Transaction ID:</b> FF060509.0640066	
City State Zip Code Defiance OH 43512-2024	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 335.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Peter J. Mouriski		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 3575		<b>Transaction ID:</b> FF060509.0650002	
City State Zip Code Arnold CA 95223-3575	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 236 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Nancy L. Von Klemperer

Mailing Address 4 Yellowwood Cluster

City State Zip Code  
Doylestown PA 18901-2161

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 08 / 2006

Transaction ID: FF060509.0650003

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David E. McLaughlin

Mailing Address PO Box 33

City State Zip Code  
Palo Verde CA 92266-0033

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 08 / 2006

Transaction ID: FF060509.0660003

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Darrel F. Wade

Mailing Address PO Box 346

City State Zip Code  
Wheatland OK 73097-0346

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
675.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 08 / 2006

Transaction ID: FF060509.0660043

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **685.00**

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

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

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

FOR LINE NUMBER: PAGE 237 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Phyllis M. Gorman

Mailing Address 4700 Town Ridge Dr

City Greensboro State NC Zip Code 27455-3422

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0660067

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ronald W. Sander

Mailing Address 705 Brittany Trl

City Florence State KY Zip Code 41042-3183

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0660069

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard E. Davis

Mailing Address 15 Lakewood St

City Sweetwater State TX Zip Code 79556-1709

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

Name of Employer Self Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0670042

Amount of Each Receipt this Period  
 200.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 238 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Margaret S. Welch</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 872 Via Bregani		<b>Transaction ID: FF060509.0670043</b>	
City State Zip Code San Lorenzo CA 94580-1462	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Eugene B. Canfield</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 2200		<b>Transaction ID: FF060509.0670091</b>	
City State Zip Code Jamestown NY 14702-2200	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. John S. Griffith, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 39 Beachcomber Dr		<b>Transaction ID: FF060509.0690068</b>	
City State Zip Code Corona Del Mar CA 92625-1413	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Nancy C. Ford

Mailing Address 890 Greenbrier St

City State Zip Code  
Saint Albans WV 25177-3868

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

Name of Employer Self Occupation Business Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0700018

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Norman E. Gaddini

Mailing Address 1060 Jonive Rd

City State Zip Code  
Sebastopol CA 95472-9217

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
281.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0700019

Amount of Each Receipt this Period  
5.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles J. Cunningham

Mailing Address 11543 Fountain Head Dr

City State Zip Code  
Tampa FL 33626-3357

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

Name of Employer Harris Interactive Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0720006

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	255.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 240 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. George Jeffrey Haworth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1061 Woodbine Cir E		<b>Transaction ID:</b> FF060509.0720022	
City State Zip Code Galesburg IL 61401-2335	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Donald W. Smiley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 1757		<b>Transaction ID:</b> FF060509.0720060	
City State Zip Code Mammoth Lakes CA 93546-1757	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William Goodwin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 407 Scot Dr		<b>Transaction ID:</b> FF060509.0720087	
City State Zip Code Newport NC 28570-9147	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Lois E. Keyse</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address <b>4520 W Road 40</b>		<b>Transaction ID: FF060509.0760002</b>	
City <b>Scott City</b>	State <b>KS</b>	Zip Code <b>67871-5085</b>	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Sumner Pingree</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address <b>28 Eagle Island PI</b>		<b>Transaction ID: FF060509.0760030</b>	
City <b>Sheldon</b>	State <b>SC</b>	Zip Code <b>29941-3016</b>	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. David B. Richard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address <b>82 Birch Ave</b>		<b>Transaction ID: FF060509.0760066</b>	
City <b>Corte Madera</b>	State <b>CA</b>	Zip Code <b>94925-1053</b>	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	425.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Albert M. Cunningham		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 262 E Barstow Ave		<b>Transaction ID:</b> FF060509.0770013	
City State Zip Code Fresno CA 93710-5032	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Harriett M. Peterson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 3400 Wagner Heights Rd Apt 160		<b>Transaction ID:</b> FF060509.0770055	
City State Zip Code Stockton CA 95209-4874	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Mary Helen Neuendorfer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1400 Waverly Rd Apt A110		<b>Transaction ID:</b> FF060509.0770075	
City State Zip Code Gladwyne PA 19035-1255	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 243 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Leib Orlandi

Mailing Address 9727 W Olympic Blvd

City State Zip Code  
Beverly Hills CA 90212-3720

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

Name of Employer King Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060509.0780013

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ambrose G. Lavery

Mailing Address 16117 SE 254th St

City State Zip Code  
Covington WA 98042-4133

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060509.0780057

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Clarence J. Duncan

Mailing Address 6401 N Camino De Michael

City State Zip Code  
Tucson AZ 85718-1939

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060509.0790033

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>725.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gerry Clark Mailing Address PO Box 604 City State Zip Code Louisville MS 39339-0604 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> FF060509.0790042 Amount of Each Receipt this Period 100.00
Name of Employer Occupation INFO REQUESTED INFO REQUESTED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 201.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Michael E. Coker Mailing Address 119 Escondido City State Zip Code Seguin TX 78155-1158 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> FF060509.0800008 Amount of Each Receipt this Period 25.00
Name of Employer Occupation INFO REQUESTED INFO REQUESTED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 226.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sharon R. Miller Mailing Address 3421 Cliffside Dr City State Zip Code La Crosse WI 54601-7804 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> FF060509.0800037 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Homemaker Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard H. Baker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 29 Prospect Ave		<b>Transaction ID:</b> FF060509.0810058
City Milton State PA Zip Code 17847-2427	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Julia F. Van Veen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 20 Sand Point Rd		<b>Transaction ID:</b> FF060509.0810066
City Kennebunkport State ME Zip Code 04046-5419	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David A. Thompson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 538 Park Ave		<b>Transaction ID:</b> FF060509.0820002
City Quarryville State PA Zip Code 17566-9235	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Quarryvillepresbyretireme-ntcommunit Occupation Engineer	Aggregate Year-to-Date ▼ 205.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 246 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Leonard J. Marshall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 431 Glen Arbor Ct		<b>Transaction ID:</b> FF060509.0820020	
City State Zip Code Kng Of Prussa PA 19406-3192	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Tomislav Iricanin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 3724 Lorings Rd		<b>Transaction ID:</b> FF060509.0820088	
City State Zip Code Norman OK 73072-0214	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 901.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Edwin L. Knauf		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 836 Leroy Ln		<b>Transaction ID:</b> FF060509.0830053	
City State Zip Code River Falls WI 54022-1291	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 281.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	280.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 247 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Mary B. Dubsky</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 708 Meadow Brook Ln		<b>Transaction ID: FF060509.0830068</b>	
City Milford	State DE	Amount of Each Receipt this Period 100.00	
Zip Code 19963-3008		Transaction ID: FF060509.0830068	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Receipt For:	Occupation Homemaker	Amount of Each Receipt this Period 100.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00	Amount of Each Receipt this Period 100.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. H. Ernest Rorer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 702 W Branch Rd		<b>Transaction ID: FF060509.0830084</b>	
City Ridgeland	State SC	Amount of Each Receipt this Period 25.00	
Zip Code 29936-4910		Transaction ID: FF060509.0830084	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 25.00	
Receipt For:	Aggregate Year-to-Date ▼ 350.00	Amount of Each Receipt this Period 25.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	350.00	Amount of Each Receipt this Period 25.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Fred U. Goshe</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 590 S Township Road 159		<b>Transaction ID: FF060509.0830090</b>	
City Tiffin	State OH	Amount of Each Receipt this Period 50.00	
Zip Code 44883-8749		Transaction ID: FF060509.0830090	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 50.00	
Receipt For:	Aggregate Year-to-Date ▼ 451.00	Amount of Each Receipt this Period 50.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	451.00	Amount of Each Receipt this Period 50.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	175.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Virginia L. Williams

Mailing Address 3081 NE 40th Ct

City Ft Lauderdale State FL Zip Code 33308-5831

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0840009

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Nieto

Mailing Address 546 Parkgate Ave

City Indianapolis State IN Zip Code 46239-6885

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

Name of Employer Volt Inc. Occupation Biologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 331.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0840019

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Haroldene Hill

Mailing Address 9710 E 5th St

City Tulsa State OK Zip Code 74128-2614

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060509.0840022

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 249 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Joseph M. Amico		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 81 Ralph Rd		Transaction ID: FF060509.0840046	
City State Zip Code New Rochelle NY 10804-1524	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00		

B. Full Name (Last, First, Middle Initial) Mr. Leslie C. Medeiros, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 775 Hoomau St		Transaction ID: FF060509.0850027	
City State Zip Code Wailuku HI 96793-9422	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

C. Full Name (Last, First, Middle Initial) Mr. John G. Crofts, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 10043 N Hickory Ln		Transaction ID: FF060509.0850029	
City State Zip Code Columbus IN 47203-9764	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	240.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 250 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Marcia Lisle

Mailing Address 16 Redonda

City Irvine State CA Zip Code 92620-1954

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	8	/	2	0	0	6

**Transaction ID:** FF060509.0870020

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas H. Birdsong, III

Mailing Address PO Box 66  
PO Box 66

City White Stone State VA Zip Code 22578-0066

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

Name of Employer Birdsong Corp Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	8	/	2	0	0	6

**Transaction ID:** FF060509.0870025

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. H. Frank Gaines

Mailing Address 17506 Northridge Dr

City Neosho State MO Zip Code 64850-8741

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	8	/	2	0	0	6

**Transaction ID:** FF060509.0870032

Amount of Each Receipt this Period  
35.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	935.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Leonard C. Warager, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 975 Jansen Ave		<b>Transaction ID:</b> FF060509.0870084
City State Zip Code San Jose CA 95125-2441	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John E. Wayant		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2401 Brixton Rd		<b>Transaction ID:</b> FF060509.0880059
City State Zip Code Edmond OK 73034-3300	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Kathleen V. Williams		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2115 1st Ave NE 2316		<b>Transaction ID:</b> FF060509.0880084
City State Zip Code Cedar Rapids IA 52402	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 252 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Madge T. Rowlett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 4808 9th Ave W		<b>Transaction ID: FF060509.0900003</b>	
City Bradenton	State FL	Zip Code 34209-3824	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Carolyn P. Haman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 176		<b>Transaction ID: FF060509.09000033</b>	
City New Carlisle	State OH	Zip Code 45344-0176	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Gerard E. Downey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 850 N El Camino Real Apt. 150		<b>Transaction ID: FF060509.09000035</b>	
City San Mateo	State CA	Zip Code 94401-3783	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 251.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 253 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. David E. Lawson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 14611 Minnich Rd		<b>Transaction ID: FF060509.0900070</b>	
City Hoagland	State IN	Zip Code 46745-9706	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Mariana B. Rowe</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 140 Saint James Dr		<b>Transaction ID: FF060509.0910004</b>	
City Piedmont	State CA	Zip Code 94611-3604	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Benjamin F. Rodgers, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 6264 San Felipe St		<b>Transaction ID: FF060509.0910006</b>	
City Houston	State TX	Zip Code 77057-2810	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 254 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John P. Desmond

Mailing Address 19380 Collins Ave  
Apt 1403

City Sunny Isles Beach State FL Zip Code 33160-2286

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

Name of Employer Galardi South Entertainment Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060509.0910008

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Mary Jane Turnbow

Mailing Address PO Box 310

City Beeville State TX Zip Code 78104-0310

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060509.0910025

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Larry Michael Gandy

Mailing Address 456 Beardsley Cir

City Henderson State NV Zip Code 89052-2670

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

Name of Employer Elite. App. Group Occupation Business Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060509.0910030

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Emry Crawford

Mailing Address 28344 Prospect Ave

City Wasco State CA Zip Code 93280-7625

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060509.0910036

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gary S. McCaleb

Mailing Address 6940 E Windstone Trl

City Scottsdale State AZ Zip Code 85262-3127

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

Name of Employer Alliance Defence Fund Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060509.0930021

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steven K. Willey

Mailing Address 1211 N Monroe St

City Plattsmouth State NE Zip Code 68048-5344

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

Name of Employer Self Occupation Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060509.0930043

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Barbara F. Harkey

Mailing Address 2214 Island Dr

City State Zip Code  
Monroe LA 71201-2301

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0930051

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Joan D. Gardner

Mailing Address 7624 Tally Ann Dr

City State Zip Code  
Tallahassee FL 32311-9478

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0930112

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gary P. Carley

Mailing Address 579 Springwood Dr N

City State Zip Code  
Mobile AL 36608-1520

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

Name of Employer Occupation  
Usa Childrens And Woman Home Maintenance Super Attend

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0940031

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 257 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Courtlandt J. Woods

Mailing Address 13040 Thoroughbred Way

City State Zip Code  
Whittier CA 90601-1428

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

Name of Employer Self Occupation Student

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0940042

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ralph W. Hooper

Mailing Address 2300 Grove Neck Rd

City State Zip Code  
Earlville MD 21919-2801

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0940079

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Laura J. Allen

Mailing Address 9924 Spirehaven Ln

City State Zip Code  
Dallas TX 75238-3466

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

Name of Employer Na Occupation Pro Bono Mediator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0940093

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Christopher J. Hare

Mailing Address 3869 Hidden Pine Ct

City State Zip Code  
Moorpark CA 93021-3024

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

Name of Employer City Of Los Angeles Occupation Firefighter

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0940117

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Mabel I. Shults

Mailing Address 155 Olive Mill Ln

City State Zip Code  
Santa Barbara CA 93108-2402

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

Name of Employer Self Occupation Designer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0950006

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Margaret McCreight

Mailing Address 725 Lewis Rd

City State Zip Code  
Sumter SC 29154-6201

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060509.0950089

Amount of Each Receipt this Period  
265.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	490.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 259 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Steven S. Estabrook		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 75 Woodland Dr		<b>Transaction ID:</b> FF060509.0950100	
City Yarmouth	State ME	Amount of Each Receipt this Period 25.00	
Zip Code 04096-6312		Transaction ID: FF060509.0950100	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 25.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1075.00	Amount of Each Receipt this Period 25.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Joe M. Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2829 Glenoaks Dr		<b>Transaction ID:</b> FF060509.0950107	
City Nashville	State TN	Amount of Each Receipt this Period 350.00	
Zip Code 37214-1605		Transaction ID: FF060509.0950107	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	Amount of Each Receipt this Period 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Peggy R. Milford		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 19059 E Hinsdale Ave		<b>Transaction ID:</b> FF060509.1000008	
City Centennial	State CO	Amount of Each Receipt this Period 300.00	
Zip Code 80016-2151		Transaction ID: FF060509.1000008	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	675.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	675.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 260 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Mercedes Cecchi		Date of Receipt MM / DD / YYYY 05 / 08 / 2006
Mailing Address 1209 Aldebaran Dr		<b>Transaction ID:</b> FF060509.1020001
City McLean	State VA	Zip Code 22101-2304
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 5000.00	
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James Derderian		Date of Receipt MM / DD / YYYY 05 / 08 / 2006
Mailing Address 4720 32nd St N		<b>Transaction ID:</b> FF060510.0010001
City Arlington	State VA	Zip Code 22207-4202
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2500.00	
Name of Employer Stanton Park Group L L C	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Rod Udd		Date of Receipt MM / DD / YYYY 05 / 08 / 2006
Mailing Address 9751 Slalom Dr		<b>Transaction ID:</b> FF060510.0010002
City Anchorage	State AK	Zip Code 99507-5947
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2500.00	
Name of Employer Anchorage Chrysler Center Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 261 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. James T. Woo		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 1270 Broadway Rm. 701		<b>Transaction ID:</b> FF060510.0010003
City State Zip Code New York NY 10001-3211	Amount of Each Receipt this Period 12500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Occupation President/CPA	Aggregate Year-to-Date ▼ 12500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Michael H. Kalb		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 541 W 50th St		<b>Transaction ID:</b> FF060510.0010004
City State Zip Code Miami Beach FL 33140-2605	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Sun Capital Partners, Inc. Occupation Private Equity	Aggregate Year-to-Date ▼ 6000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Robert L. Earl		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 8500 Melrose Ave Ste 205		<b>Transaction ID:</b> FF060510.0010005
City State Zip Code Los Angeles CA 90069-5169	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Robert L. Earl & Associates Occupation President	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	20000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 262 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Leonard B. Melvin, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 142		<b>Transaction ID:</b> FF060510.0010006	
City Laurel	State MS	Zip Code 39441-0142	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Melvin & Melvin	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. George K. Chou		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2145 S Brea Canyon Rd		<b>Transaction ID:</b> FF060510.0010007	
City Diamond Bar	State CA	Zip Code 91765-4019	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Prosperity Consulting Gro- up	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4425.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Patti A. Murphy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 112 Roosevelt Ave		<b>Transaction ID:</b> FF060510.0010008	
City Kingston	State NY	Zip Code 12401-2028	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Benedictine Hosp	Occupation Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2530.00		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 263 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Xing Long Bao		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 7200 Birch Bark Ct		<b>Transaction ID:</b> FF060510.0010009	
City Raleigh	State NC	Zip Code 27615-5303	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Recca Int'l Corp	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12010.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Gerildine Newcomer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 206 Holland Ave		<b>Transaction ID:</b> FF060510.0010010	
City Tampa	State FL	Zip Code 33617-3704	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2850.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Maria I. Santa Cruz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 3860 W Flagler St		<b>Transaction ID:</b> FF060510.0010011	
City Coral Gables	State FL	Zip Code 33134-1604	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Institute Of Nutrition & Natural Health	Occupation Nutritionist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6500.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Marcia N. Thurman

Mailing Address 1077 Shelby 306

City State Zip Code  
Clarence MO 63437-3137

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5050.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060510.0010012

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Randall Goss

Mailing Address 10210 N Central Expy Ste 500

City State Zip Code  
Dallas TX 75231-3424

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: FF060510.0020002

Amount of Each Receipt this Period  
10000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David P. Mayberry

Mailing Address 30318 Via Brisa

City State Zip Code  
Temecula CA 92592-5132

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

Name of Employer Law Office Of David P. Mayberry Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: FF060510.0040001

Amount of Each Receipt this Period  
25000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 265 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. David M. Carmen</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1301 K St NW 8th Fl. East		<b>Transaction ID: FF060510.0040002</b>	
City Washington	State DC	Zip Code 20005-3317	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Carmen Group, Inc.	Occupation President/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Mary K. Hackerman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 3402 Ella Lee Ln		<b>Transaction ID: FF060510.0080047</b>	
City Houston	State TX	Zip Code 77027-4141	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Dorothy B. Wood</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2671 Plummer Ave Apt 34S		<b>Transaction ID: FF060510.0080075</b>	
City San Jose	State CA	Zip Code 95125-4883	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 266 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Reuben H. Wilson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 10101 W Palmeras Dr Apt 223		<b>Transaction ID:</b> FF060510.0090035
City State Zip Code Sun City AZ 85373-3011	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Florence I. Natzke		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 8212 County Rd W		<b>Transaction ID:</b> FF060510.0090065
City State Zip Code Greenleaf WI 54126-9409	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Don C. Leggitt, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 603 Admiral Benbow Ln		<b>Transaction ID:</b> FF060510.0110008
City State Zip Code Mc Queeney TX 78123-3405	Amount of Each Receipt this Period 800.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer S.h. Leggitt Co.	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 267 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Stella V. Pautienis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 4411 Los Feliz Blvd Apt 608		<b>Transaction ID: FF060510.0110013</b>	
City State Zip Code Los Angeles CA 90027-2142	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1076.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Thomas L. Browning</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 13520 Harrisville Rd		<b>Transaction ID: FF060510.0110027</b>	
City State Zip Code Mount Airy MD 21771-7926	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Steven H. Davison</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 181 Liberty Rd		<b>Transaction ID: FF060510.0110039</b>	
City State Zip Code Englewood NJ 07631-2213	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Clara B. Wentz

Mailing Address 1840 Tice Creek Dr  
Apt 2402

City Walnut Creek State CA Zip Code 94595-2461

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060510.0110049

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Harvey S. Walseth

Mailing Address 436 Stanley Dr

City Santa Barbara State CA Zip Code 93105-3726

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
321.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060510.0120026

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ramiro L. Vasquez

Mailing Address 12571 Ridgecrest Dr

City Rch Cucamonga State CA Zip Code 91739-2344

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

Name of Employer Self Occupation Heavy Equipment Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060510.0120030

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 269 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Bradley M. Lemberg

Mailing Address 7400 Fair Oaks Dr

City State Zip Code  
Cincinnati OH 45237-2926

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

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

**Transaction ID:** FF060510.0120046

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Margaret H. Kipilo

Mailing Address 111 Wonder St

City State Zip Code  
Johnstown PA 15905-2649

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

**Transaction ID:** FF060510.0120058

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joyce M. Thurber

Mailing Address 2702 E Riding Way

City State Zip Code  
Orange CA 92867-2531

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

**Transaction ID:** FF060510.0130009

Amount of Each Receipt this Period  
65.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>515.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 270 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Irvin J. Larson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 11462 Pala Mesa Dr		<b>Transaction ID: FF060510.0130030</b>	
City State Zip Code Northridge CA 91326-1839	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 976.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Mady Denove</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 13145 Hesby St		<b>Transaction ID: FF060510.0130031</b>	
City State Zip Code Sherman Oaks CA 91423-2109	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Anita Bell</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 1800 Christine St		<b>Transaction ID: FF060510.0150017</b>	
City State Zip Code Pampa TX 79065-3716	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer J. L. Bell Properties	Occupation Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Helena M. Vernon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 10843 Huston St Apt 3		<b>Transaction ID:</b> FF060510.0150035	
City North Hollywood	State CA	Zip Code 91601-4616	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Kieko Morita		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 56521		<b>Transaction ID:</b> FF060510.0150040	
City Sherman Oaks	State CA	Zip Code 91413-1521	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Medical Expert	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Ferill J. Rice		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 302 Pheasant Run		<b>Transaction ID:</b> FF060510.0150054	
City Kaukauna	State WI	Zip Code 54130-1802	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	185.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 272 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Marguerite K. Hill</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 36 Countryside Ln		<b>Transaction ID: FF060510.0150058</b>	
City State Zip Code Saint Louis MO 63131-3310	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Virginia L. Lonning</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 286 Desert Lakes Dr Apt. 217		<b>Transaction ID: FF060510.0150061</b>	
City State Zip Code Palm Springs CA 92264-5514	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Mary Halverson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2405 Rosewell Pt		<b>Transaction ID: FF060510.0160010</b>	
City State Zip Code Springfield IL 62711-6739	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 273 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Jane T. Whittaker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1205 Bayshore Ave		<b>Transaction ID: FF060510.0160024</b>	
City Brigantine	State NJ	Zip Code 08203-2223	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation Homemaker	Aggregate Year-to-Date ▼ 500.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Ivan E. Barber</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 617 4th Ave		<b>Transaction ID: FF060510.0170040</b>	
City De Witt	State IA	Zip Code 52742-1707	Amount of Each Receipt this Period 55.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 206.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Dr. Scott S. MacDonald</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 112 Woodbrook Rd		<b>Transaction ID: FF060510.0180001</b>	
City White Plains	State NY	Zip Code 10605-4449	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation Director	Aggregate Year-to-Date ▼ 250.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	505.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Norman Goldstein		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 100 Kawehi Pl		<b>Transaction ID:</b> FF060510.0180004	
City State Zip Code Kula HI 96790-7802	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Franklin Pierce Hanway		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 813 Lindsay Dr		<b>Transaction ID:</b> FF060510.0210021	
City State Zip Code Modesto CA 95356-1137	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Victor C. Anderson		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 1562 Viejas Creek Trl		<b>Transaction ID:</b> FF060510.0210055	
City State Zip Code Alpine CA 91901-2351	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 275 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Clifford L. Jenson		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address PO Box 71		<b>Transaction ID:</b> FF060510.0210065	
City Homer	State AK	Zip Code 99603-0071	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1151.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Shirley S. Healy		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 410 Artemis Blvd		<b>Transaction ID:</b> FF060510.0210072	
City Merritt Is	State FL	Zip Code 32953-3178	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Marilyn A. Lehner		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address PO Box 28119		<b>Transaction ID:</b> FF060510.0220007	
City Panama City	State FL	Zip Code 32411-8119	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 276 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Marvin J. Maxwell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 5121 Maxwell Rd		<b>Transaction ID:</b> FF060510.0220014	
City Pinson	State AL	Zip Code 35126-3608	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Samuel C. Johnson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 222		<b>Transaction ID:</b> FF060510.0220055	
City Ozark	State AL	Zip Code 36361-0222	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Shirley E. Hall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 170 Norwood Dr		<b>Transaction ID:</b> FF060510.0230017	
City Council Blfs	State IA	Zip Code 51503-8400	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 277 / 2352</span> (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Thomas A. Simpson Mailing Address 2207 State St City State Zip Code Hamden CT 06517-3704 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> FF060510.0230036 Amount of Each Receipt this Period 100.00
Name of Employer Occupation Waterfront Services Inc. Security Guard Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 220.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Nicholas W. Glaser, Sr. Mailing Address 1508 Ocala Rd City State Zip Code Louisville KY 40222-6661 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> FF060510.0230063 Amount of Each Receipt this Period 80.00
Name of Employer Occupation All Childrens Pediatric Doctor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Robert L. Ehlers Mailing Address 414 Rehnberg PI City State Zip Code Saint Paul MN 55118-3213 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> FF060510.0240073 Amount of Each Receipt this Period 350.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	530.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Clifton Cabell		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 540 W Main St		<b>Transaction ID:</b> FF060510.0250005	
City State Zip Code Hackberry LA 70645-4507	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Northrop Grumman Corp	Occupation Classified Security		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Marjorie E. Glidden		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 167 Highland St		<b>Transaction ID:</b> FF060510.0260011	
City State Zip Code Ashland NH 03217-4334	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Carole Rittenhouse		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 214 Strathmore Rd		<b>Transaction ID:</b> FF060510.0260068	
City State Zip Code Havertown PA 19083-3724	Amount of Each Receipt this Period 225.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	425.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 279 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Landi Felo		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1000 W Finch Ln		Transaction ID: FF060510.0270001	
City Oak Creek	State WI	Amount of Each Receipt this Period 250.00	
Zip Code 53154-6333			
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Constance S. Wheeler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 4210 Llano Ave		Transaction ID: FF060510.0270008	
City Santa Barbara	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 93110-2423			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Patricia L. Moody		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 149 Marlewood		Transaction ID: FF060510.0270013	
City Brookeland	State TX	Amount of Each Receipt this Period 100.00	
Zip Code 75931-5656			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 301.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James G. Ellingson

Mailing Address 1111 S 70th St  
Apt 307

City Lincoln State NE Zip Code 68510-4286

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

Name of Employer INFO REQUESTED Occupation Teacher Of Physics

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060510.0270038

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Cora P. Elsner

Mailing Address 1850 Alice St  
Apt 1205

City Oakland State CA Zip Code 94612-4131

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060510.0270054

Amount of Each Receipt this Period  
25.00

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

Mailing Address 2452 Montavista PI W

City Seattle State WA Zip Code 98199-3723

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060510.0280004

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ralph Porco

Mailing Address 768 Linda Dr

City State Zip Code  
Pittsburgh PA 15226-1126

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060510.0280048

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ken L. Picard

Mailing Address 4279 U S Highway 167

City State Zip Code  
Maurice LA 70555-3703

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

Name of Employer Venture Transport Logistics LLC Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060510.0280064

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John S. Roden

Mailing Address PO Box 3298

City State Zip Code  
Riverside CA 92519-3298

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

Name of Employer John Scott Roden Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060510.0280070

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>390.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Harold A. Kent</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address <b>PO Box 335</b>		<b>Transaction ID: FF060510.0290045</b>	
City <b>Pt Pleasant</b>	State <b>WV</b>	Amount of Each Receipt this Period 100.00	
Zip Code <b>25550-0335</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 751.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Sharon Carpenter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address <b>6045 Artist Bay Rd</b>		<b>Transaction ID: FF060510.0290072</b>	
City <b>West Bend</b>	State <b>WI</b>	Amount of Each Receipt this Period 150.00	
Zip Code <b>53095-9204</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Gladys L. White</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address <b>1309 Phillips Springs Rd</b>		<b>Transaction ID: FF060510.0300005</b>	
City <b>Gladewater</b>	State <b>TX</b>	Amount of Each Receipt this Period 100.00	
Zip Code <b>75647-9242</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Care Inn Nursing Home	Occupation Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 283 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Betty L. Farrington		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 333 N Troy St Apt 1416		<b>Transaction ID:</b> FF060510.0300014	
City Royal Oak	State MI	Amount of Each Receipt this Period 100.00	
Zip Code 48067-1869		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	Amount of Each Receipt this Period 100.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Marc Kiviat		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 114 Circle Dr		<b>Transaction ID:</b> FF060510.0300026	
City Monroe	State NY	Amount of Each Receipt this Period 36.00	
Zip Code 10950-3643		Amount of Each Receipt this Period 36.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.00	
Name of Employer Noal Specialty Products	Occupation Owner	Amount of Each Receipt this Period 36.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	Amount of Each Receipt this Period 36.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Myron T. Johnston		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 105 Oakmont Cir		<b>Transaction ID:</b> FF060510.0300041	
City Harker Hts	State TX	Amount of Each Receipt this Period 100.00	
Zip Code 76548-1646		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 356.00	Amount of Each Receipt this Period 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	236.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	236.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Thomas A. Owings</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 945 Sunset Hills Ln		<b>Transaction ID: FF060510.0300065</b>	
City State Zip Code Redlands CA 92373-6964	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Raceway Ford	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Frank I. Calvert</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 3750 S Old Spanish Trl		<b>Transaction ID: FF060510.0310004</b>	
City State Zip Code Tucson AZ 85730-5638	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Josh Ammons</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1117 Chriswood Dr		<b>Transaction ID: FF060510.0310005</b>	
City State Zip Code Abilene TX 79601-5529	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Investment		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1035.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul Dunlop

Mailing Address 5055 Blue Gum Ave

City Modesto State CA Zip Code 95358-8528

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060510.0320004

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Palanivel G. Moorthy

Mailing Address 11758 Winthrop Ln

City Cincinnati State OH Zip Code 45249-1598

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

Name of Employer Self Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060510.0330062

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Andrew E. Scott

Mailing Address 2486 Crystal Lake Dr

City Spring Hill State FL Zip Code 34606-7043

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060510.0340005

Amount of Each Receipt this Period  
 25.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Kristin Miller</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 3180 San Fernando Rd		<b>Transaction ID: FF060510.0340031</b>	
City State Zip Code Atascadero CA 93422-7725	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ross William Worley</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 205 E 127th St		<b>Transaction ID: FF060510.0340057</b>	
City State Zip Code Kansas City MO 64145-1360	Amount of Each Receipt this Period 800.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wall-ties & Forms Inc	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ron Edelmann</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 1706 S Chase Ln		<b>Transaction ID: FF060510.0360027</b>	
City State Zip Code Berlin MD 21811-9489	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Realtor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 287 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Donald C. Johnson

Mailing Address 3861 Post Rd

City State Zip Code  
Winston GA 30187-1064

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

Name of Employer Occupation  
Self Owner/Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

**Transaction ID:** FF060510.0360059

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John S. Lake

Mailing Address 2451 Verna Ct

City State Zip Code  
Palm Springs CA 92262-6281

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

Name of Employer Occupation  
Johnlakedds Incorporated Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

**Transaction ID:** FF060510.0420036

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Patrick Farrah

Mailing Address 15 Kelly Cir

City State Zip Code  
Glenbrook NV 89413-9713

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

**Transaction ID:** FF060510.0450003

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 288 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Andy Lee

Mailing Address 14197 Cavalry Cir

City State Zip Code  
Corona CA 92880-3285

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060510.0450046

Amount of Each Receipt this Period  
450.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Timothy Bates

Mailing Address 1427 Norwood Ave

City State Zip Code  
Boulder CO 80304-1211

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060510.0460007

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Anibal Perez-Zapata

Mailing Address 1711 Cambridge Dr

City State Zip Code  
Alameda CA 94501-1613

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060510.0470085

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>950.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 289 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Regina W. Spence		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1220 N Ocean Blvd		<b>Transaction ID:</b> FF060510.0510007	
City State Zip Code Delray Beach FL 33483-7232	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Jane Jamar		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2715 Hunters Run		<b>Transaction ID:</b> FF060510.0530033	
City State Zip Code Brownwood TX 76801-6050	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Isabella E. Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1935 Webster St		<b>Transaction ID:</b> FF060510.0560053	
City State Zip Code Palo Alto CA 94301-4048	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William R. Greene		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 842 Grassmeade Way		<b>Transaction ID:</b> FF060510.0590001
City State Zip Code Snellville GA 30078-5694	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Alex Lehr		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 298 Broadway		<b>Transaction ID:</b> FF060510.0590075
City State Zip Code Millbrae CA 94030-2508	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Rev. Carl F. Luedtke		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2990 County Road GG		<b>Transaction ID:</b> FF060510.0600025
City State Zip Code Oshkosh WI 54904-9758	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 291 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Carol S. Katz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 15 Menikoe Point Rd		<b>Transaction ID:</b> FF060510.0600029	
City Falmouth	State ME	Zip Code 04105-1926	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Vernal F. Hoston, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 6138 Ridgeacres Dr Apt B		<b>Transaction ID:</b> FF060510.0610037	
City Cincinnati	State OH	Zip Code 45237-4919	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Scott B. Crooks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 212 Worthington Ave		<b>Transaction ID:</b> FF060510.0620003	
City Cincinnati	State OH	Zip Code 45215-4342	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	770.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Evelyn Laney</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 5604 Fort Worth Ave		<b>Transaction ID: FF060510.0620007</b>	
City State Zip Code Odessa TX 79762-4363	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Joseph A. Cavegn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 14 John St		<b>Transaction ID: FF060510.0620008</b>	
City State Zip Code Stony Point NY 10980-1912	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Loyd D. Lubinski</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 5610 Norwich Pkwy Apt 410		<b>Transaction ID: FF060510.0620010</b>	
City State Zip Code Stillwater MN 55082-6491	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

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

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

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

FOR LINE NUMBER: PAGE 293 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George C. Geisler

Mailing Address 88500 Overseas Hwy  
Apt 509

City State Zip Code  
Tavernier FL 33070-2081

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      301.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060510.0620012

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Madonna B. Waltisperger

Mailing Address 6462 Fm 1144

City State Zip Code  
Karnes City TX 78118-5008

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      676.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060510.0630002

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Kathryn M. Kamalick

Mailing Address 4712 W 88th St  
Apt 2

City State Zip Code  
Hometown IL 60456-1308

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

**Transaction ID:** FF060510.0630003

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **250.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Rosa A. Feeney		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 8 Ocean Pl		<b>Transaction ID:</b> FF060510.0650005	
City Highland Beach	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 33487-4238			
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Cher M. Pitts		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 30 Wildwood Ln		<b>Transaction ID:</b> FF060510.0650006	
City Pittsview	State AL	Amount of Each Receipt this Period 300.00	
Zip Code 36871-2638			
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Sydney M. Wood		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 1666 Oakbrooke Way		<b>Transaction ID:</b> FF060510.0660001	
City Saint Paul	State MN	Amount of Each Receipt this Period 500.00	
Zip Code 55122-4202			
FEC ID number of contributing federal political committee. C			
Name of Employer Re-max		Occupation Realtor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 295 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Gladys M. Lyon</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 35589 Frederick St		<b>Transaction ID: FF060510.0660016</b>	
City State Zip Code Wildomar CA 92595-8579	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Shirley H. Yu</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1 Summit		<b>Transaction ID: FF060510.0660034</b>	
City State Zip Code Irvine CA 92603-3625	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Caienet Systems	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Genevieve E. Below</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1236 Bentley Dr		<b>Transaction ID: FF060510.0750040</b>	
City State Zip Code Naples FL 34110-8648	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	401.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 296 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael E. Coker

Mailing Address 119 Escondido

City State Zip Code  
Sequin TX 78155-1158

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 226.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: FF060510.0760011

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Haroldene Hill

Mailing Address 9710 E 5th St

City State Zip Code  
Tulsa OK 74128-2614

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 207.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: FF060510.0760034

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Pamela K. Strickland

Mailing Address PO Box 7517

City State Zip Code  
Chestnut Mtn GA 30502-0517

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2006

Transaction ID: FF060510.0820002

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	302.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 297 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Sylvia C. Gusewelle		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 806 McGaughey St		<b>Transaction ID:</b> FF060510.0820008	
City Worden	State IL	Zip Code 62097-1275	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Erik A. Janeczko		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 4709 Woods Xing		<b>Transaction ID:</b> FF060510.0830025	
City Jefferson City	State MO	Zip Code 65109-6222	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Power Training Llc	Occupation Trainer/professional Speaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Anthony A. Sauk		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 3003 Odom Ave		<b>Transaction ID:</b> FF060510.0830043	
City Pascagoula	State MS	Zip Code 39581-2672	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Omni Engineering Inc.	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	370.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael M. Raddeman		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 1452 Padua Ave		<b>Transaction ID:</b> FF060510.0830058	
City State Zip Code Redlands CA 92374-3868	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lockheed Martin	Occupation Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Barbara Jean Browning		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 1830 Wright Dr		<b>Transaction ID:</b> FF060511.0020001	
City State Zip Code Port Orange FL 32128-6765	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Cheryl Decker		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 144 S La Arboleta St		<b>Transaction ID:</b> FF060511.0040002	
City State Zip Code Gilbert AZ 85296-1129	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 299 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Patch

Mailing Address 722 Country Pines Dr SW

City Warren State OH Zip Code 44481-9675

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0100001

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John K. McCotter

Mailing Address 239 Rocklyn Ave

City Lynbrook State NY Zip Code 11563-3745

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

Name of Employer Sears Roebuck & Co. Occupation Stock Person

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0100003

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Patch

Mailing Address 722 Country Pines Dr SW

City Warren State OH Zip Code 44481-9675

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0100008

Amount of Each Receipt this Period  
 100.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 300 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Max C. Weeks</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 9910 NE 136th St		<b>Transaction ID:</b> FF060511.0100011	
City State Zip Code Liberty MO 64068-8215	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Trinidad Gamez</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 9000 Floyd Curl Dr Apt 107		<b>Transaction ID:</b> FF060511.0100025	
City State Zip Code San Antonio TX 78240-1588	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 697.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Eleazar V. Martinez</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 324 C St Apt 177		<b>Transaction ID:</b> FF060511.0100029	
City State Zip Code Chula Vista CA 91910-1060	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	130.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 301 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Marion Matavovszky</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 12520 Edgewater Dr Apt 207		<b>Transaction ID: FF060511.0100042</b>	
City State Zip Code Lakewood OH 44107-1648	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Mildred A. Whalen</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 6407 Robinhood Ln NW		<b>Transaction ID: FF060511.0100048</b>	
City State Zip Code Huntsville AL 35806-1965	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert C. Runkle</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 303M Depot St PO Box 280		<b>Transaction ID: FF060511.0100049</b>	
City State Zip Code Altona IL 61414-0280	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	185.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold W. Bowman

Mailing Address 19029 US Highway 19 N  
Bldg 9

City State Zip Code  
Clearwater FL 33764-3015

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0100053

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Jean W. Maggs

Mailing Address 23551 130th Ct SE

City State Zip Code  
Kent WA 98031-3650

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 486.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0100059

Amount of Each Receipt this Period  
67.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Barry A. Schlech

Mailing Address 120 Enchanted Ct S

City State Zip Code  
Burleson TX 76028-2378

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

Name of Employer Alcon Labs Occupation Scientist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5885.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0100066

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	287.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Delores Freudenburg

Mailing Address 126 Green Garden Dr

City State Zip Code  
Madison NE 68748-6006

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

Name of Employer INFO REQUESTED    Occupation INFO REQUESTED

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 08 / 2006

Transaction ID: FF060511.0110005

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James G. Ellingson

Mailing Address 1111 S 70th St  
Apt 307

City State Zip Code  
Lincoln NE 68510-4286

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

Name of Employer INFO REQUESTED    Occupation Teacher Of Physics

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 08 / 2006

Transaction ID: FF060511.0110010

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. George S. Kilpatrick

Mailing Address 2315 Elk St

City State Zip Code  
Beatrice NE 68310-3443

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

Name of Employer Retired    Occupation Retired

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 08 / 2006

Transaction ID: FF060511.0110011

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	155.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Raymond J. Becker

Mailing Address 1340 Piedmont Rd

City Lincoln State NE Zip Code 68510-4968

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060511.0110012

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Roger L. Bruns

Mailing Address 12146 250th St

City Dumont State IA Zip Code 50625-7617

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

Name of Employer Roger L Bruns Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060511.0110019

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Paul Jones, Jr.

Mailing Address 305 Jean Lafitte Blvd

City Fernandina State FL Zip Code 32034-2258

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060511.0120001

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 400.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Ojars V. Klans</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1344 W 93rd St		<b>Transaction ID: FF060511.0120017</b>	
City Cleveland      State OH      Zip Code 44102-1836	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Clyde Owens Brindley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 12151 E Fm 501		<b>Transaction ID: FF060511.0120041</b>	
City San Saba      State TX      Zip Code 76877-8828	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1290.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. John K. McCotter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 239 Rocklyn Ave		<b>Transaction ID: FF060511.0120051</b>	
City Lynbrook      State NY      Zip Code 11563-3745	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sears Roebuck & Co.	Occupation Stock Person		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 306 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael Barr		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 1100 Union St		<b>Transaction ID:</b> FF060511.0120054	
City State Zip Code San Francisco CA 94109-2019	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Attorney	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Billy E. Watson		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 4412 La Paloma Rd NW		<b>Transaction ID:</b> FF060511.0120056	
City State Zip Code Albuquerque NM 87120-5359	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 201.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harrison C. Noyes, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 4 Weston Rd Unit 3312		<b>Transaction ID:</b> FF060511.0120068	
City State Zip Code Groton CT 06340-8952	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 791.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	325.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Phyllis L. Schilling</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 709 4th St NE		<b>Transaction ID: FF060511.0120069</b>	
City State Zip Code Clarion IA 50525-1214	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Fern E. Nichol</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2032 Adonis Way		<b>Transaction ID: FF060511.0120080</b>	
City State Zip Code Sacramento CA 95864-0839	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Clifford P. Tharp</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 1206		<b>Transaction ID: FF060511.0120104</b>	
City State Zip Code Ridgecrest CA 93556-1206	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	280.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. C. J. Silas

Mailing Address PO Box 2127

City State Zip Code  
Bartlesville OK 74005-2127

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0170003

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Oran W. Palmer, Jr.

Mailing Address 3327 Duke Ave

City State Zip Code  
Claremont CA 91711-3627

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0180037

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frederic D. Selbie, Jr.

Mailing Address 635 S Park Centre Ave  
Apt 1118

City State Zip Code  
Green Valley AZ 85614-6273

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0190035

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 309 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Yekaterina F. Slukhinsky		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address PO Box 350449		<b>Transaction ID:</b> FF060511.0210040	
City Brooklyn	State NY	Zip Code 11235-0449	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation M.D.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John W. Ferguson		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 319 Audrey Ave		<b>Transaction ID:</b> FF060511.0220013	
City Brooklyn	State MD	Zip Code 21225-2822	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Ceres	Occupation Long Shoreman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Sr. Gertrude A. Clark		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 34 Lower Westfield Rd		<b>Transaction ID:</b> FF060511.0230010	
City Holyoke	State MA	Zip Code 01040-2749	Amount of Each Receipt this Period 41.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	366.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard C. Corkrum

Mailing Address 3194 Crescent Ave

City Marina State CA Zip Code 93933-2753

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060511.0230063

Amount of Each Receipt this Period  
51.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Margaret M. Moloney

Mailing Address 777 Royal Saint George Dr

City Naperville State IL Zip Code 60563-2986

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060511.0240012

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard S. Dodd

Mailing Address 158 Pleasant St

City S Yarmouth State MA Zip Code 02664-4555

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

Name of Employer Self Occupation Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060511.0240048

Amount of Each Receipt this Period  
106.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	208.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gene S. Anderson

Mailing Address 7152 Harlem Rd

City State Zip Code  
Caledonia IL 61011-9627

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0240054

Amount of Each Receipt this Period  
51.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James W. Galle

Mailing Address 4400 W 115th St Apt 243

City State Zip Code  
Leawood KS 66211-2712

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 541.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0240055

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gary Lashinsky

Mailing Address 4056 Gilder Rose Pl

City State Zip Code  
Winter Park FL 32792-9416

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

Name of Employer White Stallion Productions Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0240056

Amount of Each Receipt this Period  
301.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	453.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 312 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Frank Doran		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 8069 Fountains Ln		<b>Transaction ID:</b> FF060511.0240057	
City State Zip Code Destin FL 32550-7826	Amount of Each Receipt this Period 151.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. W. R. Acree		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 422 Rosedale St		<b>Transaction ID:</b> FF060511.0240073	
City State Zip Code Toccoa GA 30577-1929	Amount of Each Receipt this Period 601.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Aenee Oil Co	Occupation Gasoline & Food Dist.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James Forinash		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address PO Box 37 PO Box 37		<b>Transaction ID:</b> FF060511.0250004	
City State Zip Code Irondale MO 63648-0037	Amount of Each Receipt this Period 26.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	778.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles Laff

Mailing Address 117 Club Course Dr

City State Zip Code  
Hilton Head SC 29928-3126

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0250010

Amount of Each Receipt this Period  
26.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Arturo Gonzalez

Mailing Address 164 Floral Dr

City State Zip Code  
Battle Creek MI 49015-4979

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

Name of Employer Occupation  
Floral Gonza Services Janitorial

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1052.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0250014

Amount of Each Receipt this Period  
301.00

**C.** Full Name (Last, First, Middle Initial)  
Capt. Thomas Leroy Sanders, Sr.

Mailing Address PO Box 731

City State Zip Code  
Clinton SC 29325-0731

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
376.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0250030

Amount of Each Receipt this Period  
51.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>378.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 314 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James A. Parker

Mailing Address 6029 Westminster Ln

City State Zip Code  
San Angelo TX 76901-5331

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

Name of Employer Shannon Clinic Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0250031

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charlie L. Cobb

Mailing Address 1198 Siesta Key Cir

City State Zip Code  
Port Orange FL 32128-7030

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

Name of Employer Charlie Cobb State Farm Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0250037

Amount of Each Receipt this Period  
251.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Katie MacDonald

Mailing Address 1044 S Nevada St

City State Zip Code  
Oceanside CA 92054-5037

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

Name of Employer Super Nutrition Occupation Sales Rep

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0250054

Amount of Each Receipt this Period  
26.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>378.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 315 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John W. Tiso

Mailing Address 35168 Highway 79

City Warner Spgs State CA Zip Code 92086-9708

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0250059

Amount of Each Receipt this Period  
 101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Melvin C. Magidson

Mailing Address 571 Pine Valley Rd SE

City Marietta State GA Zip Code 30067-4827

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0250063

Amount of Each Receipt this Period  
 101.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Lanette Davis Beard

Mailing Address 121 E Main St

City Magnolia State AR Zip Code 71753-3516

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0250064

Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	303.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Nicholas A. Popa

Mailing Address 614 Plumtree Ln

City State Zip Code  
Fenton MI 48430-4206

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0250070

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter J. Aspesi

Mailing Address PO Box 532

City State Zip Code  
Yarmouth Port MA 02675-0532

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

Name of Employer Fallon Associates Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0250075

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John K. McCotter

Mailing Address 239 Rocklyn Ave

City State Zip Code  
Lynbrook NY 11563-3745

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

Name of Employer Sears Roebuck & Co. Occupation Stock Person

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0260021

Amount of Each Receipt this Period  
26.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>377.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 317 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George S. Monkhouse

Mailing Address 801 Torribrooke Ln

City Athens State TX Zip Code 75751-2159

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0260031

Amount of Each Receipt this Period  
201.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Nathan Stringer

Mailing Address PO Box 868

City Laurel State MS Zip Code 39441-0868

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

Name of Employer B & R Industrial Supply Inc. Occupation Clerk

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0260048

Amount of Each Receipt this Period  
301.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James J. Kratoska

Mailing Address 20815 Macaulay Dr

City Brookfield State WI Zip Code 53045-4017

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

Name of Employer Self Occupation Business Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0260057

Amount of Each Receipt this Period  
501.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1003.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 318 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roy W. Murdock

Mailing Address 128 W 154th St

City State Zip Code  
Gardena CA 90248-2202

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

Name of Employer Occupation  
Coast Plating Inc President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0260067

Amount of Each Receipt this Period  
151.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bill E. Holbrooks

Mailing Address PO Box 249

City State Zip Code  
Stanfield NC 28163-0249

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

Name of Employer Occupation  
Self Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0260074

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard W. Ressler

Mailing Address 5156 Andrus Ave

City State Zip Code  
North Olmsted OH 44070-4303

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

Name of Employer Occupation  
North Lake Steel Corp. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: FF060511.0260076

Amount of Each Receipt this Period  
226.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>478.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 319 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Mary L. Buis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 3202 E Prairie St		<b>Transaction ID:</b> FF060511.0270021	
City State Zip Code Decatur IL 62521-2336	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John W. Forsha		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 4124 Hemlock Rd		<b>Transaction ID:</b> FF060511.0270025	
City State Zip Code Cherry Tree PA 15724-7219	Amount of Each Receipt this Period 61.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 511.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Marilyn S. Kim		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 84 Stewart Rd		<b>Transaction ID:</b> FF060511.0270050	
City State Zip Code Needham MA 02492-1120	Amount of Each Receipt this Period 156.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Dedham Medical Assoc Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 411.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	418.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 320 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Donald Calfee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 1114 W 1st St Apt B-6		<b>Transaction ID:</b> FF060511.0270062
City State Zip Code Maryville MO 64468-2003	Amount of Each Receipt this Period 101.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. John W. Gemmer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 1905 Russett Ave		<b>Transaction ID:</b> FF060511.0270069
City State Zip Code Goshen IN 46528-5736	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer The Goshen News	Occupation Publisher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Nelson S. Burbank		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 24 Juniper Cir		<b>Transaction ID:</b> FF060511.0270070
City State Zip Code Reading MA 01867-1836	Amount of Each Receipt this Period 201.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	402.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Patricia Weeden		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 620 Sand Hill Rd Apt 203F		<b>Transaction ID:</b> FF060511.0270079
City Palo Alto	State CA	
Zip Code 94304-2616		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Patrick Rea		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 6951 Lexington Ct		<b>Transaction ID:</b> FF060511.0270082
City Tinley Park	State IL	
Zip Code 60477-1672		Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Us Sba 5	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Eddie R. Fischer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2020 E Orangethorpe Ave		<b>Transaction ID:</b> FF060511.0280035
City Fullerton	State CA	
Zip Code 92831-5327		Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Visita Paint Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	152.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Timothy L. Nosbisch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 76 N Bridge St		<b>Transaction ID:</b> FF060511.0280039	
City State Zip Code Gary IN 46404-1074	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer North American Refractor- es Co	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Joan M. Halbruegger		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 5845 Nottingham Ave Apt 4		<b>Transaction ID:</b> FF060511.0300020	
City State Zip Code Saint Louis MO 63109-2736	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Sue House		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 2020		<b>Transaction ID:</b> FF060511.0300085	
City State Zip Code Ruidoso NM 88355-2020	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jay S. Hahn		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 11009		<b>Transaction ID:</b> FF060511.0300089	
City Cedar Rapids	State IA	Zip Code 52410-1009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
Name of Employer J. S. Hahn Insurance Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Todd C. Quinn		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 54166		<b>Transaction ID:</b> FF060511.0300094	
City Redondo	State WA	Zip Code 98054-0166	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Kelly Evans		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 710B Stella St		<b>Transaction ID:</b> FF060511.0310021	
City West Monroe	State LA	Zip Code 71291-4142	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
Name of Employer Kelly Evans Electric Llc	Occupation Electrical Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	3.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 324 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jack Wetzel

Mailing Address 494 Powderhouse Rd

City Aiken State SC Zip Code 29801-5148

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

Name of Employer Self Occupation Horseman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0310093

Amount of Each Receipt this Period  
 1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James E. Haas

Mailing Address 27777 Franklin Rd Ste 1330 Ste 1330

City Southfield State MI Zip Code 48034-8211

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

Name of Employer James E. Haas, CPA, PC Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0310094

Amount of Each Receipt this Period  
 1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert S. Kirkendall

Mailing Address 8675 W 96th St Ste 207

City Overland Park State KS Zip Code 66212-3382

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

Name of Employer The Roberts Group Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1128.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: FF060511.0320002

Amount of Each Receipt this Period  
 5.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 325 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Marion Matavovszky</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2006
Mailing Address 12520 Edgewater Dr Apt 207		<b>Transaction ID:</b> FF060511.0320004
City Lakewood	State OH	
Zip Code 44107-1648	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1.00
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 251.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Billy E. Watson</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2006
Mailing Address 4412 La Paloma Rd NW		<b>Transaction ID:</b> FF060511.0340002
City Albuquerque	State NM	
Zip Code 87120-5359	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1.00
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 201.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Modesto Gomez</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2006
Mailing Address 18611 Peninsula Club Dr		<b>Transaction ID:</b> FF060511.0370004
City Cornelius	State NC	
Zip Code 28031-5113	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 355.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	52.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Arlo W. Turner</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 4814 S 7th St		<b>Transaction ID: FF060511.0370005</b>	
City State Zip Code Milwaukee WI 53221-2445	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 599.75	

Full Name (Last, First, Middle Initial) <b>B. Ms. Suryakant Vyas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 705 W State Road 434 Ste E Ste E		<b>Transaction ID: FF060511.0380001</b>	
City State Zip Code Longwood FL 32750-4907	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Center Pointe Properties Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Dr. Michael Donald Hughson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 116 Azalea Trails Dr Apt J101		<b>Transaction ID: FF060511.0390001</b>	
City State Zip Code Brandon MS 39047-7909	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	440.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 327 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. De T. Sheng</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 9915 Claymore Dr		<b>Transaction ID: FF060511.0390002</b>	
City State Zip Code Dallas TX 75243-2422	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer De Sheng & Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ezra Habtnesh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 9025 Wilshire Blvd Ste 301		<b>Transaction ID: FF060511.0390003</b>	
City State Zip Code Beverly Hills CA 90211-1827	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ezra Healthcare, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 502.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Harriett M. Peterson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 3400 Wagner Heights Rd Apt 160		<b>Transaction ID: FF060511.0500022</b>	
City State Zip Code Stockton CA 95209-4874	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	925.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 328 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gary R. Crabb		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 13113 Winding Vine Ln		<b>Transaction ID:</b> FF060511.0510002	
City State Zip Code Oklahoma City OK 73170-2071	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Point 2 Point Communicati-on	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ambrose G. Lavery		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 16117 SE 254th St		<b>Transaction ID:</b> FF060511.0510049	
City State Zip Code Covington WA 98042-4133	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard E. Gulbranson		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 114 Encino Ave		<b>Transaction ID:</b> FF060511.0510065	
City State Zip Code Camarillo CA 93010-1721	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Property Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 329 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Theodore F. Craver		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 67 Spindle Ln		<b>Transaction ID:</b> FF060511.0510071	
City Hilton Head Island	State SC	Amount of Each Receipt this Period 200.00	
Zip Code 29926-1273		Transaction ID: FF060511.0510071	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 200.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. George S. Kilpatrick		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 2315 Elk St		<b>Transaction ID:</b> FF060511.0510080	
City Beatrice	State NE	Amount of Each Receipt this Period 50.00	
Zip Code 68310-3443		Transaction ID: FF060511.0510080	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.00	Amount of Each Receipt this Period 50.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Margot L. Griggs		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 3 Tyler Ct		<b>Transaction ID:</b> FF060511.0520088	
City Northampton	State MA	Amount of Each Receipt this Period 50.00	
Zip Code 01060-2107		Transaction ID: FF060511.0520088	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Retired	Occupation Homemaker	Amount of Each Receipt this Period 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	Amount of Each Receipt this Period 50.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	300.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 330 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Prentice C. Crawford

Mailing Address 207 Whitley Ave

City State Zip Code  
Stanford KY 40484-1448

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

Name of Employer Occupation  
Rr Donnolloy & Sons Machine Line Operator

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 335.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

**Transaction ID:** FF060511.0530069

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Warren Packard

Mailing Address 2420 Buffalo Ln

City State Zip Code  
Soddy Daisy TN 37379-3115

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

**Transaction ID:** FF060511.0530071

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael P. Keeley, Jr.

Mailing Address 27 Lindorf Dr

City State Zip Code  
Belleville IL 62223-1225

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

**Transaction ID:** FF060511.0530080

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 331 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Malone

Mailing Address 18721 E Buckskin Dr

City State Zip Code  
Rio Verde AZ 85263-7164

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

Name of Employer Retired      Occupation Retired

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

**Transaction ID:** FF060511.0540023

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Agnes Grochow

Mailing Address 3710 Ivar Ave

City State Zip Code  
Rosemead CA 91770-1840

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      310.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

**Transaction ID:** FF060511.0550038

Amount of Each Receipt this Period  
110.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth Moore Ruffin

Mailing Address 1707 Jarvis St  
Ste 110

City State Zip Code  
Raleigh NC 27608-2236

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

Name of Employer Self      Occupation Homemaker

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

**Transaction ID:** FF060511.0570016

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2610.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 332 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Donald Mustain</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 5231 NW 3rd Ter		<b>Transaction ID: FF060511.0570034</b>	
City State Zip Code Boca Raton FL 33487-4309	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Financial Planner	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Anthony Dinos</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1620 SE 10th St		<b>Transaction ID: FF060511.0580027</b>	
City State Zip Code Ft Lauderdale FL 33316-1422	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mrs. Constance S. Wheeler</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 4210 Llano Ave		<b>Transaction ID: FF060511.0580046</b>	
City State Zip Code Santa Barbara CA 93110-2423	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

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

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

FOR LINE NUMBER: PAGE 333 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Elman H. Sandell

Mailing Address 21 Stonebriar Way

City State Zip Code  
Frisco TX 75034-5938

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060511.0610002

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Naish M. Barranti

Mailing Address 1736 Glen Una Ave

City State Zip Code  
San Jose CA 95125-2528

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

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060511.0610018

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Norman J. Mosso

Mailing Address PO Box 349  
PO Box 349

City State Zip Code  
Latrobe PA 15650-0349

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060511.0610066

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **725.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 334 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Wade Micoley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 3035 Brook Hills Pl		<b>Transaction ID:</b> FF060511.0690017	
City State Zip Code Green Bay WI 54313-8177	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Lloyd P. Shepherd		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 58484 Buffalo Mine Rd		<b>Transaction ID:</b> FF060511.0700008	
City State Zip Code Senecaville OH 43780-9711	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2403.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Panaila Forman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 243 Pebblestone Dr		<b>Transaction ID:</b> FF060511.0700011	
City State Zip Code Huntsville AL 35806-1180	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 335 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Anthony J. Lund, MD

Mailing Address 103 Rio Vis

City State Zip Code  
Los Gatos CA 95032-1169

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: FF060511.0700012

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Lcdr Milburn K. Freer

Mailing Address 4226 Utah St  
Apt 20

City State Zip Code  
San Diego CA 92104-1857

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 426.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: FF060511.0700016

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Alice N. Harnett

Mailing Address 402 W Carolina Ave

City State Zip Code  
Summerville SC 29483-4361

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: FF060511.0700018

Amount of Each Receipt this Period  
35.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	110.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Stanley A. Ryan

Mailing Address PO Box 1383

City State Zip Code  
Rainier OR 97048-1383

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: FF060511.0700020

Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Roy M. Gullick

Mailing Address 9902 Jamacha Blvd  
Spc 167

City State Zip Code  
Spring Valley CA 91977-8167

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: FF060511.0700025

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roy M. Gullick

Mailing Address 9902 Jamacha Blvd  
Spc 167

City State Zip Code  
Spring Valley CA 91977-8167

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: FF060511.0700026

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 60.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 337 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Marvin H. Schuett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address PO Box 66 Box 66		Transaction ID: FF060511.0700027	
City Hustisford	State WI	Amount of Each Receipt this Period 150.00	
Zip Code 53034-0066			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

B. Full Name (Last, First, Middle Initial) Mr. Robert W. Beard		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 104 Bass Ave		Transaction ID: FF060511.0700031	
City Gloucester	State MA	Amount of Each Receipt this Period 15.00	
Zip Code 01930-3162			
FEC ID number of contributing federal political committee. C			
Name of Employer Sag-aftra	Occupation Actor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

C. Full Name (Last, First, Middle Initial) Mrs. Hulda W. Betts		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 4046 Jackdaw St		Transaction ID: FF060511.0700033	
City San Diego	State CA	Amount of Each Receipt this Period 10.00	
Zip Code 92103-1721			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William Kehoe

Mailing Address 4342 N Hermitage Ave

City State Zip Code  
Chicago IL 60613-1106

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Cab Driver

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060511.0700035

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Emma A. Hinshaw

Mailing Address 106 Sunshine Hill St  
Apt 201

City State Zip Code  
Spruce Pine NC 28777-2849

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060511.0700040

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Anna P. Hangartner

Mailing Address 2825 Stein Blvd

City State Zip Code  
Eau Claire WI 54701-6284

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060511.0700041

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 339 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Oscar Killian, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 176 Madonna Dr		<b>Transaction ID:</b> FF060511.0700045	
City State Zip Code Benton LA 71006-9772	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ayyad R. Ghobrial		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 8412 Northport Dr		<b>Transaction ID:</b> FF060511.0700046	
City State Zip Code Huntingtn Bch CA 92646-4425	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael B. May		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 3304 Rhodes Ave # 128		<b>Transaction ID:</b> FF060511.0700047	
City State Zip Code New Boston OH 45662-4914	Amount of Each Receipt this Period 866.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3947.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	991.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 340 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Jean R. Wawa</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address <b>5166 NW 105th Ct</b>		<b>Transaction ID: FF060511.0710003</b>	
City <b>Doral</b>	State <b>FL</b>	Amount of Each Receipt this Period 100.00	
Zip Code <b>33178-3215</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation <b>Entrepreneur</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. David Ringdahl</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address <b>1409 14th Ave E Apt 6</b>		<b>Transaction ID: FF060511.0710007</b>	
City <b>West Fargo</b>	State <b>ND</b>	Amount of Each Receipt this Period 40.00	
Zip Code <b>58078-3412</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>INFO REQUESTED</b>	Occupation <b>INFO REQUESTED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Pauline A. Fachtmann</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address <b>2236 W Weldon Ave</b>		<b>Transaction ID: FF060511.0710015</b>	
City <b>Phoenix</b>	State <b>AZ</b>	Amount of Each Receipt this Period 360.00	
Zip Code <b>85015-5449</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 341 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. H. Calvin Fisher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1915 Tesla Dr		<b>Transaction ID:</b> FF060511.0710029	
City State Zip Code Colorado Springs CO 80909-1429	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Marvin A. Keller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 330 S Center St Ste 402		<b>Transaction ID:</b> FF060511.0710040	
City State Zip Code Casper WY 82601-2876	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Roy H. Tunby		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 512 S 15th Ave		<b>Transaction ID:</b> FF060511.0710052	
City State Zip Code Bozeman MT 59715-4140	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 342 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Shirley I. Gunsch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 7702 W Mitchell Dr		<b>Transaction ID:</b> FF060511.0710067	
City State Zip Code Phoenix AZ 85033-4208	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James H. Pemberton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address PO Box 1538		<b>Transaction ID:</b> FF060511.0710075	
City State Zip Code Belton TX 76513-5538	Amount of Each Receipt this Period 110.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Eliot H. Jenkins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 13169 SE River Rd Apt 307T		<b>Transaction ID:</b> FF060511.0710082	
City State Zip Code Portland OR 97222-9789	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 517.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 343 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Donald P. Ebright		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 5056 Festival Blvd Apt A Apt A		<b>Transaction ID:</b> FF060511.0720001
City Bellingham State WA Zip Code 98226-7610	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 455.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. W. Glen Hicks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 809 Kennon St		<b>Transaction ID:</b> FF060511.0720006
City Minden State LA Zip Code 71055-2311	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 211.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. William M. Snow, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 532 Northpark Dr		<b>Transaction ID:</b> FF060511.0720010
City Bossier City State LA Zip Code 71111-2242	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 821.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 344 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. May Y. Carrell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 205 W 8th St		<b>Transaction ID: FF060511.0720025</b>	
City State Zip Code Port Angeles WA 98362-6014	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Norman M. Jones</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 526 24th Ave S		<b>Transaction ID: FF060511.0720028</b>	
City State Zip Code Fargo ND 58103-5718	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. James Fisher</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 2195 E Pine River Rd		<b>Transaction ID: FF060511.0720032</b>	
City State Zip Code Midland MI 48640-8662	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 345 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Victor E. Dewhirst		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 805 Harris St		<b>Transaction ID:</b> FF060511.0720033	
City Frontenac	State KS	Zip Code 66763-2107	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 426.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Anthony J. Knap		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1405 Village Way		<b>Transaction ID:</b> FF060511.0720037	
City Walla Walla	State WA	Zip Code 99362-9273	Amount of Each Receipt this Period 160.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 471.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. G. Gress Rogers		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 2104 Douglas Ave		<b>Transaction ID:</b> FF060511.0720052	
City Ames	State IA	Zip Code 50010-4912	Amount of Each Receipt this Period 325.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	560.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 346 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Nicholas A. Amabile, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1512 Wilson Ave		<b>Transaction ID:</b> FF060511.0720055	
City State Zip Code New Castle PA 16101-5017	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Thomas Johnson Sturgis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1112 Evergreen Cir		<b>Transaction ID:</b> FF060511.0720059	
City State Zip Code Rock Hill SC 29732-3127	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert C. Crozier		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 7558 Beal St		<b>Transaction ID:</b> FF060511.0720073	
City State Zip Code San Diego CA 92111-4325	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	130.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 347 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Mary Sally Aylward</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address <b>115 S Rutan St # 10-B</b>		<b>Transaction ID: FF060511.0720079</b>
City <b>Wichita</b>	State <b>KS</b>	Zip Code <b>67218-1135</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert E. Simpson, Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address <b>PO Box 340</b>		<b>Transaction ID: FF060511.0720090</b>
City <b>Coshocton</b>	State <b>OH</b>	Zip Code <b>43812-0340</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 210.00
Name of Employer Mfm Building Products Corp	Occupation Corp Exec.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. Miss Trinidad Gamez</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address <b>9000 Floyd Curl Dr Apt 107</b>		<b>Transaction ID: FF060511.0730002</b>
City <b>San Antonio</b>	State <b>TX</b>	Zip Code <b>78240-1588</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	510.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 348 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Philip A. McDonald</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address <b>2120 Markham Way</b>		<b>Transaction ID: FF060511.0740009</b>	
City <b>Sacramento</b>	State <b>CA</b>	Zip Code <b>95818-3140</b>	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Carl R. Gettys</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address <b>5134 Air Force Dr</b>		<b>Transaction ID: FF060511.0740012</b>	
City <b>Wichita Falls</b>	State <b>TX</b>	Zip Code <b>76306-1356</b>	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard L. Nicholas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address <b>3813 Grenville Dr</b>		<b>Transaction ID: FF060511.0740017</b>	
City <b>Charlottesville</b>	State <b>VA</b>	Zip Code <b>22903-7673</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	105.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 349 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Robin Wohlstader		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006
Mailing Address # D 344 N Reading Ave		Transaction ID: FF060511.0740020
City State Zip Code New Berlinville PA 19545-0213	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Wilfred Bishop		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006
Mailing Address 109 Deerfield Ct		Transaction ID: FF060511.0740034
City State Zip Code Franklin TN 37069-6008	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Thomas M. Anstett		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006
Mailing Address 1300 Rose Rd		Transaction ID: FF060511.0740042
City State Zip Code Lake Zurich IL 60047-1554	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Power Nail Co Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 350 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Victor J. Barish, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 6370 Stoneridge Mall Rd Apt 1111		Transaction ID: FF060511.0750024	
City Pleasanton State CA Zip Code 94588-7286		Amount of Each Receipt this Period 27.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Laurence Livzrmire National Lab Occupation Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 227.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Marjorie Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 6 Huckleberry Ln		Transaction ID: FF060511.0750042	
City Augusta State ME Zip Code 04330-6022		Amount of Each Receipt this Period 51.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 276.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John A. Bolster		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 8531 88th St # 3		Transaction ID: FF060511.0750063	
City Woodhaven State NY Zip Code 11421-1308		Amount of Each Receipt this Period 151.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 601.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	229.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 351 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Julio Valdivieso</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address PO Box 40472		<b>Transaction ID: FF060511.0750072</b>	
City State Zip Code Downey CA 90239-1472	Amount of Each Receipt this Period 39.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Eme Inc.	Occupation Salesman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.50		

Full Name (Last, First, Middle Initial) <b>B. Mr. Edward M. Jenkins</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1820 Willow Oak Cir		<b>Transaction ID: FF060511.0760008</b>	
City State Zip Code Salt Lake Cty UT 84121-2180	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Herman G. Riggs</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1404 NW 122nd St Apt 222		<b>Transaction ID: FF060511.0760010</b>	
City State Zip Code Oklahoma City OK 73114-8050	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	341.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 352 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Frances Gulbert</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 4915 Mansbury St		<b>Transaction ID:</b> FF060511.0760011	
City Fremont	State CA	Zip Code 94538-3224	Amount of Each Receipt this Period 151.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B. Miss Rebecca M. Scowden</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1508 Doran Dr		<b>Transaction ID:</b> FF060511.0760017	
City Odessa	State TX	Zip Code 79761-1523	Amount of Each Receipt this Period 11.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Eric N. Ferguson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 92 Half Mile Rd		<b>Transaction ID:</b> FF060511.0760035	
City Darien	State CT	Zip Code 06820-2108	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	263.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 353 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Anthony M. Rood, Jr.

Mailing Address 1608 W Winslow Dr

City State Zip Code  
Mequon WI 53092-5000

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: FF060511.0760045

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Fred W. Stuart

Mailing Address 4030 Grey Fox Ct

City State Zip Code  
Sanford NC 27332-7303

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2651.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: FF060511.0760057

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Paul W. Krause

Mailing Address 1301 Herkimer St

City State Zip Code  
Joliet IL 60432-1057

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: FF060511.0760078

Amount of Each Receipt this Period  
251.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	403.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 354 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Margaret L. Feldkamp		Date of Receipt MM / DD / YYYY 05 / 09 / 2006
Mailing Address 4633 E Farmdale Ave		Transaction ID: FF060511.0770004
City Mesa	State AZ	
Zip Code 85206-2725		Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. C		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael H. Wieland		Date of Receipt MM / DD / YYYY 05 / 09 / 2006
Mailing Address 1800 Riviera Ln Apt 3		Transaction ID: FF060511.0770007
City O Fallon	State IL	
Zip Code 62269-6696		Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Ann S. Baker		Date of Receipt MM / DD / YYYY 05 / 09 / 2006
Mailing Address 1919 Harvard Ave # 159		Transaction ID: FF060511.0770034
City Irvine	State CA	
Zip Code 92612		Amount of Each Receipt this Period 152.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	354.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 355 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Claire J. McConnell		Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2006	
Mailing Address 319 W Main St		<b>Transaction ID:</b> FF060511.0770036	
City Melrose	State MN	Zip Code 56352-1065	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Marion M. Hendrickson		Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2006	
Mailing Address 3300 Kirkwall St		<b>Transaction ID:</b> FF060511.0770040	
City El Paso	State TX	Zip Code 79925-4117	Amount of Each Receipt this Period 32.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Marie C. Hesse		Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2006	
Mailing Address 3326 Highlands Bridge Rd		<b>Transaction ID:</b> FF060511.0770047	
City Sarasota	State FL	Zip Code 34235-6859	Amount of Each Receipt this Period 201.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	334.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 356 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Timothy B. Horne		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 116 Highland Dr		<b>Transaction ID:</b> FF060511.0790056	
City Kosciusko	State MS	Zip Code 39090-3819	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Canadian National Railroad	Occupation Construction Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Rodney R. Nash		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 18335 Old Coach Way		<b>Transaction ID:</b> FF060511.0790069	
City Poway	State CA	Zip Code 92064-6636	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1501.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Gerry Clark		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address PO Box 604		<b>Transaction ID:</b> FF060511.0790099	
City Louisville	State MS	Zip Code 39339-0604	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 357 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Marjorie B. Tolle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1905 NW 160th PI		Transaction ID: FF060511.080023	
City State Zip Code Edmond OK 73013-1433	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Robert O. Petrucci		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 513 Putnam Pike		Transaction ID: FF060511.080038	
City State Zip Code Greenville RI 02828-3004	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Brook Florist Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Margaret V. Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 400 Sewell Ct		Transaction ID: FF060511.080052	
City State Zip Code Irving TX 75038-6283	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 358 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Luke C. Gentrup		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 9195 W 6th Ave		<b>Transaction ID:</b> FF060511.0800063	
City State Zip Code Lakewood CO 80215-5103	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pinkard Construction	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Sean Donahue		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address PO Box 811220		<b>Transaction ID:</b> FF060511.0800073	
City State Zip Code Los Angeles CA 90081-0004	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Donahue Electric Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Roger J. Hochstin		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 245 Nightingale Trl		<b>Transaction ID:</b> FF060511.0800094	
City State Zip Code Palm Beach FL 33480-3203	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 359 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Robert G. Rohwer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1700 Hidden Oaks Dr		<b>Transaction ID: FF060511.0830021</b>	
City State Zip Code Stillwater OK 74074-1081	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Marcia W. Monnier</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 6985 Wembley Cir		<b>Transaction ID: FF060511.0840017</b>	
City State Zip Code Dayton OH 45459-6211	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Dolores C. Ghyselinc</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 40530 Highway 41		<b>Transaction ID: FF060511.0860022</b>	
City State Zip Code Oakhurst CA 93644-9621	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 360 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Gerildine Newcomer

Mailing Address 206 Holland Ave

City Tampa State FL Zip Code 33617-3704

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060511.0870010

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Gerildine Newcomer

Mailing Address 206 Holland Ave

City Tampa State FL Zip Code 33617-3704

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060511.0900003

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Elliot A. Baines

Mailing Address 360 Indian Harbor Rd

City Vero Beach State FL Zip Code 32963-3509

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4125.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060511.0900025

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 361 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Donald R. Elweski

Mailing Address 7311 Valley View Dr

City Cleveland State OH Zip Code 44131-3435

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: FF060511.0910015

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Theodore Dimitriou

Mailing Address 27775 N Saint Marys Rd

City Libertyville State IL Zip Code 60048-9657

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: FF060511.0910027

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stephen F. Sidles

Mailing Address 6626 E Brilliant Sky Dr

City Scottsdale State AZ Zip Code 85262-7226

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: FF060511.0940005

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>351.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 362 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Louis A. Vazquez		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 201 Hilda St Ste 38		<b>Transaction ID:</b> FF060511.0940019	
City State Zip Code Kissimmee FL 34741-2359	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hear Again Care Centers Llc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Calvin W. Nerdrum		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 5909 Seaview Ave NW		<b>Transaction ID:</b> FF060511.0940026	
City State Zip Code Seattle WA 98107-3361	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Salmon Bay Sandy Gradel Co Inc	Occupation Owner/president		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John D. Trimble, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 2316 N Calion Rd		<b>Transaction ID:</b> FF060511.0980001	
City State Zip Code El Dorado AR 71730-3361	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Office Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	122.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Joshua Shere

Mailing Address 12701 Marco Pl

City State Zip Code  
Los Angeles CA 90066-3037

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** FF060511.0980004

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John T. Brown

Mailing Address 1534 SW 49th Ter

City State Zip Code  
Cape Coral FL 33914-6933

FEC ID number of contributing federal political committee. **C**

Name of Employer K & L Tank Inc      Occupation Consultant/part Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** FF060511.0980009

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Annelise B. Rothe

Mailing Address 78 Khakum Wood Rd

City State Zip Code  
Greenwich CT 06831-3748

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** FF060511.0980024

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 364 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Margaret R. Matheis

Mailing Address 1490 Carlotta Dr

City Hemet State CA Zip Code 92543-2673

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: FF060511.0990022

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. F. William Rundle

Mailing Address 8460 E Cresthill Dr

City Tucson State AZ Zip Code 85750-2411

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: FF060511.0990034

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Leila F. Lawrence

Mailing Address 50 Broadmoor

City Jackson State TN Zip Code 38305-2525

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: FF060511.0990037

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 365 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Christopher H. Bradley

Mailing Address 2515 Springmill Rd

City Findlay State OH Zip Code 45840-2861

FEC ID number of contributing federal political committee. **C**

Name of Employer Hancor Occupation Accountant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** FF060511.0990064

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Dorothy B. Argo

Mailing Address 3354 7th Ave

City Carmel State CA Zip Code 93923-8217

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** FF060511.0990077

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Carl M. Clark

Mailing Address 3749 Hemlock Dr

City Sn Bernrdno State CA Zip Code 92404-3104

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** FF060511.0990108

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 366 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel B. Scherer

Mailing Address 6135 Sawmill Woods Dr

City State Zip Code  
Fort Wayne IN 46835-8711

FEC ID number of contributing federal political committee. **C**

Name of Employer American Decompression Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
05 / 10 / 2006

Transaction ID: FF060511.0990109

Amount of Each Receipt this Period  
160.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Francis J. Blanchard, Jr.

Mailing Address 1022A Council Dr

City State Zip Code  
Alexandria LA 71303-5756

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
05 / 10 / 2006

Transaction ID: FF060511.1000005

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Anna M. Buonocore

Mailing Address 33 Stone Ln

City State Zip Code  
Levittown NY 11756-1051

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
05 / 10 / 2006

Transaction ID: FF060511.1000009

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	385.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 367 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Randall Weir		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 860 S Oneida St Apt C117		<b>Transaction ID:</b> FF060511.1000032
City State Zip Code Denver CO 80224-3542	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ced	Occupation Truck Driver	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. D. W. Ashby, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address PO Box 1928 Apt. 2506		<b>Transaction ID:</b> FF060511.1000047
City State Zip Code Pinehurst NC 28370-1928	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Kathleen Mahan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 546 W Gladstone St		<b>Transaction ID:</b> FF060511.1000048
City State Zip Code San Dimas CA 91773-1816	Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Employed	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	395.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 368 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edward R. Aguiar

Mailing Address 2697 Ashlan Ave

City Clovis State CA Zip Code 93611-5555

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
05 / 10 / 2006

Transaction ID: FF060511.1000057

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bill Glocker

Mailing Address 841 Prudential Dr Ste 1400

City Jacksonville State FL Zip Code 32207-8364

FEC ID number of contributing federal political committee. **C**

Name of Employer Stoneburner, Berry & Simmons Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
05 / 10 / 2006

Transaction ID: FF060511.1030002

Amount of Each Receipt this Period  
750.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark P. Rems

Mailing Address 4251 S Natches Ct Ste G

City Sheridan State CO Zip Code 80110-8603

FEC ID number of contributing federal political committee. **C**

Name of Employer Complete Builders Services Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 10 / 2006

Transaction ID: FF060511.1040001

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Frances Dewent

Mailing Address 504 Air Gon SE

City State Zip Code  
Albuquerque NM 87123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Santa Fe. Carwash LLC Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: FF060511.1040007

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael S. Addy

Mailing Address 4849 Highway 501

City State Zip Code  
Myrtle Beach SC 29579-9446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Addy's Harbor Dodge Auto Dealer

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: FF060511.1040013

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stephen Di Marco

Mailing Address 973 Commonwealth Ave

City State Zip Code  
Boston MA 02215-1305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
T's Pub. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: FF060511.1040014

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 370 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Roy D. Mediate		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address PO Box 788		<b>Transaction ID:</b> FF060511.1050001	
City Monticello	State FL	Amount of Each Receipt this Period 150.00	
Zip Code 32345-0788		FEC ID number of contributing federal political committee. C	
Name of Employer Royal Mini Storage	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard S. Griffith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 3417 Milam St		<b>Transaction ID:</b> FF060511.1050010	
City Houston	State TX	Amount of Each Receipt this Period 100.00	
Zip Code 77002-9531		FEC ID number of contributing federal political committee. C	
Name of Employer Richard S Griffiths	Occupation Investor	Aggregate Year-to-Date ▼ 860.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Guy Barr		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 2717 Bramble Dr		<b>Transaction ID:</b> FF060511.1060011	
City Monroe	State LA	Amount of Each Receipt this Period 250.00	
Zip Code 71201-2320		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 371 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Michael S. Patterson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address <b>PO Box 2545</b>		<b>Transaction ID: FF060511.1080007</b>	
City <b>Morgan City</b>	State <b>LA</b>	Zip Code <b>70381-2545</b>	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Central Boat Rentals Inc</b>	Occupation <b>G/b V.p. C B R</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Wayne Lowe</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address <b>PO Box 83</b>		<b>Transaction ID: FF060511.1080013</b>	
City <b>Gadsden</b>	State <b>AL</b>	Zip Code <b>35902-0083</b>	Amount of Each Receipt this Period 251.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>INFO REQUESTED</b>	Occupation <b>INFO REQUESTED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Lloyd Smith</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address <b>1312 W Grand Ave Apt 5</b>		<b>Transaction ID: FF060511.1090016</b>	
City <b>Port Washington</b>	State <b>WI</b>	Zip Code <b>53074-2042</b>	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	353.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 372 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Edmond Cooper</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1107 Linden Dr		<b>Transaction ID: FF060511.1090027</b>	
City State Zip Code Bloomington IN 47408-1274	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Catherine E. Pielage</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 214 SE 44th Ter		<b>Transaction ID: FF060511.1090029</b>	
City State Zip Code Cape Coral FL 33904-8427	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Howard F. Hammack</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 2122 Golden Eagle Dr W		<b>Transaction ID: FF060511.1130011</b>	
City State Zip Code Tallahassee FL 32312-4036	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	22.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 373 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. James E. Haas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 27777 Franklin Rd Ste 1330 Ste 1330		<b>Transaction ID:</b> FF060512.0010005
City State Zip Code Southfield MI 48034-8211	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer James E. Haas, CPA, PC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jay S. Hahn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address PO Box 11009		<b>Transaction ID:</b> FF060512.0010011
City State Zip Code Cedar Rapids IA 52410-1009	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer J. S. Hahn Insurance Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Todd C. Quinn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address PO Box 54166		<b>Transaction ID:</b> FF060512.0010017
City State Zip Code Redondo WA 98054-0166	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	325.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 374 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Todd C. Quinn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 54166		Transaction ID: FF060512.0020002	
City Redondo	State WA	Zip Code 98054-0166	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 241.00	

B. Full Name (Last, First, Middle Initial) Mr. Todd C. Quinn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 54166		Transaction ID: FF060512.0040001	
City Redondo	State WA	Zip Code 98054-0166	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 241.00	

C. Full Name (Last, First, Middle Initial) Mr. Jack Wetzel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 494 Powderhouse Rd		Transaction ID: FF060512.0050004	
City Aiken	State SC	Zip Code 29801-5148	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Horseman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

SUBTOTAL of Receipts This Page (optional) .....	235.00
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 375 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James H. Carroll, Jr.

Mailing Address 3711 W Walnut St

City Tampa State FL Zip Code 33607-2514

FEC ID number of contributing federal political committee. **C**

Name of Employer: Carroll Air Systems, Inc. Occupation: Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060512.0060001

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph Caiafa

Mailing Address 14351 Rose Ave

City Flushing State NY Zip Code 11355-2326

FEC ID number of contributing federal political committee. **C**

Name of Employer: Retired Occupation: Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060512.0090002

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel J. Kary

Mailing Address 159 Longley Rd

City Greene State ME Zip Code 04236-3314

FEC ID number of contributing federal political committee. **C**

Name of Employer: INFO REQUESTED Occupation: Physician, Farmer, Restaurateur

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: FF060512.0140001

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>401.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 376 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Rodney R. Nash		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 18335 Old Coach Way		<b>Transaction ID:</b> FF060512.0370002	
City State Zip Code Poway CA 92064-6636	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1501.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Timothy L. Nosbisch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 76 N Bridge St		<b>Transaction ID:</b> FF060512.0370007	
City State Zip Code Gary IN 46404-1074	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer North American Refractori- es Co	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Eddie R. Fischer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 2020 E Orangethorpe Ave		<b>Transaction ID:</b> FF060512.0380001	
City State Zip Code Fullerton CA 92831-5327	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Visita Paint Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 377 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Vernon B. Rasmussen

Mailing Address 3050 90th PI SE

City Mercer Island State WA Zip Code 98040-3119

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060512.0390002

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jerome D. Ryan

Mailing Address 806 Buchanan Blvd # 115-324

City Boulder City State NV Zip Code 89005-2130

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060512.0400002

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jacki A. Mercado

Mailing Address 3202 Leaf Dr

City Merced State CA Zip Code 95340-8300

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060512.0400003

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 378 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William H. Brezovski

Mailing Address 4754 E Flamingo Rd  
# 542

City Las Vegas State NV Zip Code 89121-4709

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060512.0400005

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Calvin W. Nerdrum

Mailing Address 5909 Seaview Ave NW

City Seattle State WA Zip Code 98107-3361

FEC ID number of contributing federal political committee. **C**

Name of Employer Salmon Bay Sandy Gradel Co Inc Occupation Owner/president

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060512.0400006

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stephen F. Sidles

Mailing Address 6626 E Brilliant Sky Dr

City Scottsdale State AZ Zip Code 85262-7226

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: FF060512.0430007

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	340.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 379 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Donald L. Stahfeld

Mailing Address 9735 W Country Club Dr

City State Zip Code  
Sun City AZ 85373-1729

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

**Transaction ID:** FF060512.0430009

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry Elmer Buckholz

Mailing Address 25607 Midway St

City State Zip Code  
Dearborn Hts MI 48127-3078

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1276.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

**Transaction ID:** FF060512.0430013

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William R. Crawford

Mailing Address 769 Ashby Dr

City State Zip Code  
Waukeee IA 50263-9709

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

**Transaction ID:** FF060512.0430014

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 380 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Earl G. Duha		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 24108 State Highway 27		Transaction ID: FF060512.0430016	
City State Zip Code Eastman WI 54626-8771	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Gary E. Lowe		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 12852 Century St		Transaction ID: FF060512.0440001	
City State Zip Code Overland Park KS 66213-2291	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ssa - Oha	Occupation Federal Admin Law Judge		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David J. Bunnell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1210 Park Newport Apt 412		Transaction ID: FF060512.0460001	
City State Zip Code Newport Beach CA 92660-5021	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 381 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Victor H. Hanson, II		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 3910 Hunters Ln		Transaction ID: FF060512.0480001	
City Birmingham	State AL	Zip Code 35243-5920	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Birmingham News Co.	Occupation Publisher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Dale J. Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address PO Box 309		Transaction ID: FF060512.0530002	
City Gaylord	State MI	Zip Code 49734-0309	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dale J Smith Broker Inc.	Occupation Broker Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Geoffery T. Chow		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 8991 Imogene St		Transaction ID: FF060512.0540006	
City Houston	State TX	Zip Code 77036-7401	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-employed	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 382 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Catherine E. Pielage</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 214 SE 44th Ter		<b>Transaction ID: FF060512.0580002</b>	
City State Zip Code Cape Coral FL 33904-8427	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Edmond Cooper</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 1107 Linden Dr		<b>Transaction ID: FF060512.0580003</b>	
City State Zip Code Bloomington IN 47408-1274	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert L. Mahr</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 24460 Woodsage Dr		<b>Transaction ID: FF060512.0630001</b>	
City State Zip Code Bonita Springs FL 34134-7959	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	360.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 383 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Wallace Glenn Yancey

Mailing Address PO Box 758

City Lanett State AL Zip Code 36863-0758

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: FF060512.0630002

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bobby R. Wichmann

Mailing Address 6033 N County Road 500 W

City Greencastle State IN Zip Code 46135-8997

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: FF060512.0630005

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Bobbie W. Powers

Mailing Address 4549 Wood River Dr

City Fairbanks State AK Zip Code 99709-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1478.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: FF060512.0650004

Amount of Each Receipt this Period  
 3.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	503.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 384 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Jo G. Goetz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address PO Box 4363		<b>Transaction ID:</b> FF060512.0670009	
City Horseshoe Bay	State TX	Zip Code 78657-4363	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Robert E. Heise		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 4663 Elm Sq		<b>Transaction ID:</b> FF060512.0670033	
City Elizabeth	State CO	Zip Code 80107-7877	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James L. Terry		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 6182 Hefley St		<b>Transaction ID:</b> FF060512.0670043	
City Westminster	State CA	Zip Code 92683-2966	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Blue White Inds	Occupation Computer Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 385 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Christopher D. Calhoun		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 627 Gaffney Rd		<b>Transaction ID:</b> FF060512.0670097	
City State Zip Code Fairbanks AK 99701-4607	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Chris Calhoun Real Estate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Charles Pruitt		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 1146 W 37th St # 3		<b>Transaction ID:</b> FF060512.0680011	
City State Zip Code Los Angeles CA 90007-3952	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Leon J. Hurtubise		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 4810 W 40th Ln		<b>Transaction ID:</b> FF060512.0680023	
City State Zip Code Minneapolis MN 55416-3006	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	375.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 386 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. William M. Waggy, Jr.

Mailing Address 363 Buck Ave

City Vacaville State CA Zip Code 95688-3844

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 11 / 2006

**Transaction ID:** FF060512.0680025

Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sally S. Cirino

Mailing Address 17495 Hidden Trail Rd

City Laguna Hills State CA Zip Code 92653-5875

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 11 / 2006

**Transaction ID:** FF060512.0680030

Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Neil Romano

Mailing Address 13711 Loria Ct

City Clarksville State MD Zip Code 21029-1350

FEC ID number of contributing federal political committee. **C**

Name of Employer Subtlest Occupation Media Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 11 / 2006

**Transaction ID:** FF060512.0700001

Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 387 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Creager

Mailing Address 22023 Erincrest Ct

City State Zip Code  
Katy TX 77450-8047

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0760007

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Glen Hinton

Mailing Address 18155 Traylor Rd

City State Zip Code  
Ramona CA 92065-6969

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation Mortgage Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0770002

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Brown

Mailing Address 3709 Shenandoah St

City State Zip Code  
Dallas TX 75205-2120

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0770004

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 388 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Irma F. Howard

Mailing Address 7230 Acacia Dr

City State Zip Code  
Leander TX 78641-9385

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0780061

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Peggy Pitchford

Mailing Address 2022 Brushy Rd

City State Zip Code  
Columbus TX 78934-3459

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0780073

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joe C. Cooper

Mailing Address 17011 Carson Dr

City State Zip Code  
Horizon City TX 79928-6430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0790011

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 389 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Mary Helen Neuendorfer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 1400 Waverly Rd Apt A110		<b>Transaction ID:</b> FF060512.0790014	
City Gladwyne	State PA	Zip Code 19035-1255	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. John R. Bertucci		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 50 Hill St		<b>Transaction ID:</b> FF060512.0790086	
City Lexington	State MA	Zip Code 02421-4318	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer M K S Instruments Incorporated		Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. George A. West		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address PO Box 2137		<b>Transaction ID:</b> FF060512.0800028	
City Belle Glade	State FL	Zip Code 33430-7137	Amount of Each Receipt this Period 65.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	615.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 390 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Edward S. McBride</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1007 Landon Ln		<b>Transaction ID: FF060512.0800050</b>	
City State Zip Code Arnold MD 21012-1706	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Dorothy Ann Crozler</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 3405 Stewart Cir		<b>Transaction ID: FF060512.0800074</b>	
City State Zip Code Waco TX 76708-1035	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard Thurber</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 198 Chippewa Trl		<b>Transaction ID: FF060512.0810031</b>	
City State Zip Code Medford Lakes NJ 08055-1842	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 391 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Marcia L. Devlin		Date of Receipt MM / DD / YYYY 05 / 11 / 2006
Mailing Address 125 E Cuttriss St		<b>Transaction ID:</b> FF060512.0810043
City Park Ridge	State IL	Zip Code 60068-2722
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 75.00
Name of Employer R & J Gamz Farms	Occupation Property Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael D. Miller		Date of Receipt MM / DD / YYYY 05 / 11 / 2006
Mailing Address 1506 Navajo St		<b>Transaction ID:</b> FF060512.0820056
City Burlington	State IA	Zip Code 52601-3485
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer Burlington Bank & Trust	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Anthony Surina		Date of Receipt MM / DD / YYYY 05 / 11 / 2006
Mailing Address 13930 Oaks Ave		<b>Transaction ID:</b> FF060512.0820067
City Chino	State CA	Zip Code 91710-7010
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer Surina Construction	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>425.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 392 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. R. F. Nowlin

Mailing Address 20203 National Dr

City State Zip Code  
Lago Vista TX 78645-6220

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0820072

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Joan Donahoe

Mailing Address 1704 E Edgewood Pl

City State Zip Code  
Sioux Falls SD 57103-4568

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0820080

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Jackie Dean

Mailing Address 5372 Riverview Dr

City State Zip Code  
Saint Augustine FL 32080-7235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0820082

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 393 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jose Saud, Sr.

Mailing Address 7 Reserve Ave  
Fl. 1

City Jersey City State NJ Zip Code 07307-4402

FEC ID number of contributing federal political committee. **C**

Name of Employer  
INFO REQUESTED

Occupation  
INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0830001

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Nancy M. Shutts

Mailing Address 11325 Tamarack Rd

City Waterford State PA Zip Code 16441-3857

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0830036

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marquerite M. Foster

Mailing Address 20 Golf View Dr

City Dumont State NJ Zip Code 07628-1015

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Burrough Of Pramis

Occupation  
Secretary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0830039

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	325.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 394 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Norman E. Gaddini		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 1060 Jonive Rd		<b>Transaction ID:</b> FF060512.0850059	
City State Zip Code Sebastopol CA 95472-9217	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 281.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Albert M. Cunningham		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 262 E Barstow Ave		<b>Transaction ID:</b> FF060512.0850073	
City State Zip Code Fresno CA 93710-5032	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Patrick Herriman		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 41650 Riveroaks Dr		<b>Transaction ID:</b> FF060512.0850086	
City State Zip Code Plymouth MI 48170-4324	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 395 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Ferill J. Rice</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 302 Pheasant Run		Transaction ID: FF060512.0860014	
City State Zip Code Kaukauna WI 54130-1802	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Writer	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Ms. Priscilla L. Kernek</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 352 Kiwanis Cir		Transaction ID: FF060512.0860057	
City State Zip Code Chuluota FL 32766-9637	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Caliber Occupation Program Manager	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas L. Browning</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 13520 Harrisville Rd		Transaction ID: FF060512.0860061	
City State Zip Code Mount Airy MD 21771-7926	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 396 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert A. Young

Mailing Address 4950 Red Winery Rd

City State Zip Code  
Geyserville CA 95441-9573

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Robert Young Vineyards Grape Grower

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

**Transaction ID:** FF060512.0860075

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert D. Young

Mailing Address 37329 Highlite Dr

City State Zip Code  
Sterling Heights MI 48310-3946

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
General Dynamics Land Systems Inc. Engineer

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

**Transaction ID:** FF060512.0860092

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Nelson

Mailing Address PO Box 1449

City State Zip Code  
Ontario CA 91762-0449

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Building Inspector

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

**Transaction ID:** FF060512.0870032

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 397 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert J. Mohler		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 5202 Avenida Despacio		<b>Transaction ID:</b> FF060512.0900001	
City Laguna Woods      State CA      Zip Code 92637-1809	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1605.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. James K. Conrad		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 539 Black Bear Rd NE		<b>Transaction ID:</b> FF060512.0910011	
City Albuquerque      State NM      Zip Code 87122-1815	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Doris M. McDonald		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 5717 Emelia Ave		<b>Transaction ID:</b> FF060512.0910012	
City Baltimore      State MD      Zip Code 21206-2207	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 832.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 398 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Solomon N. Hoke		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 1801 Bachmans Valley Rd		Transaction ID: FF060512.0910031	
City State Zip Code Westminster MD 21158-3206	Amount of Each Receipt this Period 11.11		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.11		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Earl E. Thaxton		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 505 Aspen Way		Transaction ID: FF060512.0910033	
City State Zip Code Evergreen CO 80439-4026	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William Kehoe		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 4342 N Hermitage Ave		Transaction ID: FF060512.0910037	
City State Zip Code Chicago IL 60613-1106	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Cab Driver		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	66.11
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 399 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Olaf T. Von Ramm

Mailing Address 4718 Harmony Church Rd

City Efland State NC Zip Code 27243-9383

FEC ID number of contributing federal political committee. **C**

Name of Employer Duke University Occupation Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

**Transaction ID:** FF060512.0920004

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Barbara W. Ogden

Mailing Address 2929 Chatsworth Blvd

City San Diego State CA Zip Code 92106-1463

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

**Transaction ID:** FF060512.0920021

Amount of Each Receipt this Period  
225.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Aniello R. Torlincasi

Mailing Address 16418 S 34th Way

City Phoenix State AZ Zip Code 85048-7867

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1101.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

**Transaction ID:** FF060512.0920023

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>825.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 400 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sarah L. Klein

Mailing Address PO Box 5201

City State Zip Code  
Sun City Center FL 33571-5201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0920027

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Robert J. Fleischaker, MD

Mailing Address 4620 Serigraph Ct

City State Zip Code  
Oceanside CA 92057-6809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 875.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0920035

Amount of Each Receipt this Period  
225.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Hulda W. Betts

Mailing Address 4046 Jackdaw St

City State Zip Code  
San Diego CA 92103-1721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 336.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0930031

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	425.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 401 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark M. Degray

Mailing Address 55 Lenox Rd  
Apt 2V

City State Zip Code  
Rockville Centre NY 11570-5261

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: FF060512.0930033

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Donald E. Wallin

Mailing Address 5260 Ashlar Dr

City State Zip Code  
Bloomington MN 55437-3365

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: FF060512.0930043

Amount of Each Receipt this Period  
115.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Don Rogert

Mailing Address 26515 Blondo Ct

City State Zip Code  
Waterloo NE 68069-6221

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: FF060512.0930046

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 402 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Ruth M. Dufresne		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 5241 Utica St		<b>Transaction ID:</b> FF060512.0930066	
City State Zip Code Metairie LA 70006-6445	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 296.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Joseph Conroy		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 3230 Lilac Dr N		<b>Transaction ID:</b> FF060512.0930071	
City State Zip Code Minneapolis MN 55422-2725	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self		Occupation Construction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Arlo W. Turner		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 4814 S 7th St		<b>Transaction ID:</b> FF060512.0940001	
City State Zip Code Milwaukee WI 53221-2445	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 599.75	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	170.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 403 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William R. Bowser, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006
Mailing Address 318 Edgewood Ave		<b>Transaction ID:</b> FF060512.0940005
City State Zip Code Fort Wayne IN 46805-1718	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer City Of Fort Wayne	Occupation Fireman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John T. McTier		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006
Mailing Address 2521 Winding Way		<b>Transaction ID:</b> FF060512.0940009
City State Zip Code Valdosta GA 31602-1239	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Thomas A. Bondehagen		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006
Mailing Address 310 Santa Rita Pl		<b>Transaction ID:</b> FF060512.0940033
City State Zip Code Banning CA 92220-1942	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	190.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 404 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Helen E. Gomberg

Mailing Address 30421 Mirador Ct

City Laguna Niguel State CA Zip Code 92677-2303

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: FF060512.0940035

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Scott T. Lesueur

Mailing Address 438 S 30th St

City Mesa State AZ Zip Code 85204-3111

FEC ID number of contributing federal political committee. **C**

Name of Employer Lesueur & Dodaro Occupation Owner/dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: FF060512.0940039

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James A. Niedert

Mailing Address 839 7th Ave SW Apt 3

City Rochester State MN Zip Code 55902-6391

FEC ID number of contributing federal political committee. **C**

Name of Employer Mayo Clinic Occupation Med Lab Technician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: FF060512.0940041

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	280.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 405 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. H. Blake Smith</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1000 Harmony Ln		<b>Transaction ID: FF060512.0940068</b>	
City Fullerton	State CA	Zip Code 92831-1912	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Corbet Smith Co	Occupation Salesman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Randy E. Kreiser</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 2120 Tall Pines Ct		<b>Transaction ID: FF060512.0950011</b>	
City Catonsville	State MD	Zip Code 21228-4775	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Engenio Informational Technology	Occupation Mgr./Systems Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Verna L. Miell</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 13022 SE 234th St		<b>Transaction ID: FF060512.0950012</b>	
City Kent	State WA	Zip Code 98031-3627	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	110.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 406 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Maurice E. Marler

Mailing Address 616 109th Ave SE

City Bellevue State WA Zip Code 98004-6338

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
05 / 11 / 2006

Transaction ID: FF060512.0950013

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Benton Cowen

Mailing Address 103 23rd St

City Snyder State TX Zip Code 79549-3101

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Oil Well Drilling Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
05 / 11 / 2006

Transaction ID: FF060512.0950018

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Eugene Littman

Mailing Address 1126 River Rd

City New Windsor State NY Zip Code 12553-6728

FEC ID number of contributing federal political committee. **C**

Name of Employer Usa Illuminations Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
05 / 11 / 2006

Transaction ID: FF060512.0950031

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 407 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Alberto L. Ribas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 11371 SW 3rd St		<b>Transaction ID: FF060512.0950037</b>	
City State Zip Code Miami FL 33174-1107	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AJ Engineering	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Richard J. Speer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 5886 Kerr Pl		<b>Transaction ID: FF060512.0950059</b>	
City State Zip Code Fayetteville NC 28314-1391	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Securitas Security Services Usa Inc.	Occupation Nuclear Security Consultant, Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Joseph C. Dwyer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 1616 W State St PO Box 648		<b>Transaction ID: FF060512.0950061</b>	
City State Zip Code Olean NY 14760-3355	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Trial Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	825.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Patch

Mailing Address 722 Country Pines Dr SW

City Warren State OH Zip Code 44481-9675

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0950064

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James R. Adgate

Mailing Address 345 Durst Dr NW

City Warren State OH Zip Code 44483-1105

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Company Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0950065

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Roberta Turner

Mailing Address 8423 Broadmoor St

City Shawnee Msn State KS Zip Code 66212-1118

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0950075

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 450.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 409 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Eugene W. Becker		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006
Mailing Address 1008 S Logan St Apt 12		<b>Transaction ID:</b> FF060512.0950080
City Lena	State IL	Zip Code 61048-9003
Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Geraldine E. Sheppard		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006
Mailing Address 5470 Coach Lite Trl		<b>Transaction ID:</b> FF060512.0950082
City Loves Park	State IL	Zip Code 61111-3516
Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 589.50	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Edwin S. Sedlacek		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006
Mailing Address 6029 89th St E		<b>Transaction ID:</b> FF060512.0960009
City Puyallup	State WA	Zip Code 98371-6291
Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	260.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 410 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Howard L. Hatfield		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 327 S Summit Ave		<b>Transaction ID:</b> FF060512.0960010	
City Bremerton	State WA	Zip Code 98312-4223	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Raymond S. Hinson		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1935 Sioux City Ct		<b>Transaction ID:</b> FF060512.0960019	
City Henderson	State NV	Zip Code 89052-7043	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Owen Lee		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 12735 SW 114th Ave		<b>Transaction ID:</b> FF060512.0960041	
City Miami	State FL	Zip Code 33176-4511	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Cycle World	Occupation Businessman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 411 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Ruthanne P. Kelly

Mailing Address 5943 Pine View Dr

City Ypsilanti State MI Zip Code 48197-8985

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
05 / 11 / 2006

Transaction ID: FF060512.0960043

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Helen E. Ochs

Mailing Address RR 1 Box 43C

City Tionesta State PA Zip Code 16353-9502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 402.50

Date of Receipt  
05 / 11 / 2006

Transaction ID: FF060512.0960045

Amount of Each Receipt this Period  
60.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ed Cutshaw

Mailing Address PO Box 309

City Grapeland State TX Zip Code 75844-0309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
05 / 11 / 2006

Transaction ID: FF060512.0960055

Amount of Each Receipt this Period  
105.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 515.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 412 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Lavadell L. Murphy</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 4322 Jarbet Dr		<b>Transaction ID: FF060512.0960066</b>	
City State Zip Code San Antonio TX 78220-1649	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Owen M. Gruber</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 23417 Maestro PI		<b>Transaction ID: FF060512.0960068</b>	
City State Zip Code West Hills CA 91304-5231	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. William H. Seaman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 7328 Forbes Ave		<b>Transaction ID: FF060512.0960069</b>	
City State Zip Code Van Nuys CA 91406-2737	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 601.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 413 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard M. White

Mailing Address 342 E Warren Ave

City State Zip Code  
Longwood FL 32750-4271

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0960078

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
Bennie P. Redwine

Mailing Address 7139 Timbercreek Dr

City State Zip Code  
San Antonio TX 78227-1737

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0960080

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Joan L. O'Donnell

Mailing Address 820 Steele Dr

City State Zip Code  
Brea CA 92821-2227

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 606.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0960083

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 414 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Beverly D. Jefferies

Mailing Address 180 S San Rafael Ave

City Pasadena State CA Zip Code 91105-1523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: FF060512.0960084

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas H. Root

Mailing Address 22149 Victory Blvd

City Woodland Hills State CA Zip Code 91303-2525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: FF060512.0960087

Amount of Each Receipt this Period  
60.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael Gonzalez

Mailing Address 2400 N Ventura Ave  
Apt 3

City Ventura State CA Zip Code 93001-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: FF060512.0960094

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **435.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 415 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas C. Elliott

Mailing Address RR 5 Box 457

City State Zip Code  
New Castle PA 16105-9410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0960095

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles T. Reynolds

Mailing Address 314 Grove St

City State Zip Code  
Westwood MA 02090-1028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0970002

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William M. Waggy, Jr.

Mailing Address 363 Buck Ave

City State Zip Code  
Vacaville CA 95688-3844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: FF060512.0970010

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 416 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles L. Gould

Mailing Address 5102 Tennis Court St E

City State Zip Code  
Las Vegas NV 89120-1333

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0970018

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles G. Watson

Mailing Address 566 Weed St

City State Zip Code  
New Canaan CT 06840-6127

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0970054

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. H. Edward Jans

Mailing Address PO Box 958

City State Zip Code  
Orleans MA 02653-0958

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060512.0970057

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 417 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Joseph Betofe</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 5625 Amanda St		<b>Transaction ID: FF060512.0980005</b>	
City State Zip Code San Diego CA 92114-3912	Amount of Each Receipt this Period 106.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Africa Minerals	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Gail C. Brochu</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address PO Box 1445		<b>Transaction ID: FF060512.0980022</b>	
City State Zip Code Edgartown MA 02539-1445	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Margaret J. McWhirter</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 5125 Beaumont Way North Dr		<b>Transaction ID: FF060512.0980031</b>	
City State Zip Code Indianapolis IN 46250-1658	Amount of Each Receipt this Period 501.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	658.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 418 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Van Quan Tran Mailing Address 13965 Fernwood Dr City Garden Grove State CA Zip Code 92843-3455 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 <b>Transaction ID:</b> FF060512.0990045 Amount of Each Receipt this Period 21.00
Name of Employer: Van Tran & Associates Occupation: Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 266.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Nelson J. Squires, III Mailing Address 6285 Whitetail Dr City Coopersburg State PA Zip Code 18036-9587 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 <b>Transaction ID:</b> FF060512.0990046 Amount of Each Receipt this Period 301.00
Name of Employer: Air Products And Chemicals, Inc. Occupation: Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 601.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ruth Warheit Mailing Address 121 Iroquois Dr City Butler State PA Zip Code 16001-0522 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 <b>Transaction ID:</b> FF060512.0990054 Amount of Each Receipt this Period 103.00
Name of Employer: INFO REQUESTED Occupation: INFO REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 203.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>425.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 419 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James C. Seley

Mailing Address 1675 S Euclid Ave

City State Zip Code  
San Marino CA 91108-1604

FEC ID number of contributing federal political committee. **C**

Name of Employer Seley & Co      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

**Transaction ID:** FF060512.0990081

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Cecil E. Watts

Mailing Address 1434 Hunters Trl

City State Zip Code  
Glendora CA 91740-4525

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

**Transaction ID:** FF060512.1000045

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stephen M. Whitney

Mailing Address 50 Kendall Pond Rd

City State Zip Code  
Derry NH 03038-4395

FEC ID number of contributing federal political committee. **C**

Name of Employer Comcast Adv.      Occupation Sales Representative

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

**Transaction ID:** FF060512.1010032

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	102.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 420 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jori Zabava		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 11702 British Arms St		Transaction ID: FF060512.1010091	
City State Zip Code San Antonio TX 78251-3328	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Employed	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Irene I. Manlapaz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address PO Box 13073		Transaction ID: FF060512.1010092	
City State Zip Code Alexandria LA 71315-3073	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Geologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William H. Brezovski		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 4754 E Flamingo Rd # 542		Transaction ID: FF060512.1010093	
City State Zip Code Las Vegas NV 89121-4709	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 421 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Col. William W. White		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 6403 238th Ave		<b>Transaction ID:</b> FF060512.1030010	
City State Zip Code Salem WI 53168-9637	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Sarah S. Rindlaub		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 8441 SE 68th St # 217		<b>Transaction ID:</b> FF060512.1060008	
City State Zip Code Mercer Island WA 98040-5235	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Charles F. Gorder, Sr.		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 5526 Toyon Rd		<b>Transaction ID:</b> FF060512.1090009	
City State Zip Code San Diego CA 92115-1020	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lorene ETAL		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 422 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Charles Rappold</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1050 Rahway Rd		<b>Transaction ID: FF060512.1090043</b>	
City State Zip Code Plainfield NJ 07060-3408	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bank of New York	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Miss Nancy L. Gowing</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 307 Paoli Woods		<b>Transaction ID: FF060515.0040002</b>	
City State Zip Code Paoli PA 19301-1539	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Donald L. Flamm</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 5333 W Melinda Ln		<b>Transaction ID: FF060515.0040005</b>	
City State Zip Code Glendale AZ 85308-9300	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 423 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Christopher J. Pierce		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 3729 W Lake Rd		<b>Transaction ID:</b> FF060515.0040006	
City State Zip Code Apex NC 27539-7643	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Insurance Agent	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. George O. Curme, III		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1212 Townbrook Xing		<b>Transaction ID:</b> FF060515.0090004	
City State Zip Code Charlottesville VA 22901-0677	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 226.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Loraine G. Linton		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 192 Maple Point Dr		<b>Transaction ID:</b> FF060515.0150003	
City State Zip Code Langhorne PA 19047-1452	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 391.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	545.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 424 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Raymond S. Hinson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 1935 Sioux City Ct		<b>Transaction ID:</b> FF060515.0170015	
City State Zip Code Henderson NV 89052-7043	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Frederic H. Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 5100 John D Ryan Blvd Apt 324		<b>Transaction ID:</b> FF060515.0210001	
City State Zip Code San Antonio TX 78245-3538	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Guy J. Ladouceur		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 4550 Deer Forest Ave		<b>Transaction ID:</b> FF060515.0210002	
City State Zip Code Las Vegas NV 89139-7641	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Star Vacation Resorts	Occupation Executive Director of Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.50		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	101.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 425 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John Jarvis Shelton		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 732 W Bode Cir Apt 103		<b>Transaction ID:</b> FF060515.0230002	
City Hoffman Estates	State IL	Zip Code 60194-2917	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fuji Hunt Photochemical	Occupation Janitor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. George O. Curme, III		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1212 Townbrook Xing		<b>Transaction ID:</b> FF060515.0230003	
City Charlottesville	State VA	Zip Code 22901-0677	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Lucille C. Holcomb		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 605 19th Ave S		<b>Transaction ID:</b> FF060515.0230005	
City Birmingham	State AL	Zip Code 35205-6455	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 426 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. David R. Van Bibber		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 6321 Vicuna Dr		Transaction ID: FF060515.0260002	
City State Zip Code Las Vegas NV 89146-3007	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 626.00		

B. Full Name (Last, First, Middle Initial) Mr. Russell E. Hamachek		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 8589 N Arnold Palmer Dr		Transaction ID: FF060515.0260005	
City State Zip Code Tucson AZ 85742-9401	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

C. Full Name (Last, First, Middle Initial) Mr. Guy J. Ladouceur		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 4550 Deer Forest Ave		Transaction ID: FF060515.0260006	
City State Zip Code Las Vegas NV 89139-7641	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Star Vacation Resorts	Occupation Executive Director of Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.50		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 427 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Bruce M. Foulk		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 2365 S Venoy Rd		<b>Transaction ID:</b> FF060515.0260007	
City State Zip Code Westland MI 48186-4662	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Self Employed	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Terril A. Efirm		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 2519 W Magill Ave		<b>Transaction ID:</b> FF060515.0260010	
City State Zip Code Fresno CA 93711-1136	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Arlington G. Kuklinca		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 697 Chalfonte PI NE		<b>Transaction ID:</b> FF060515.0260011	
City State Zip Code Warren OH 44484-2114	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Corning Clinical Labs Occupation Pathologist	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 428 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. George B. Skipworth		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 3330 E Lindsay Dr		<b>Transaction ID:</b> FF060515.0260018	
City State Zip Code Columbus GA 31907-2027	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Irene I. Manlapaz		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address PO Box 13073		<b>Transaction ID:</b> FF060515.0280003	
City State Zip Code Alexandria LA 71315-3073	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Geologist Aggregate Year-to-Date ▼ 271.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William H. Brezovski		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 4754 E Flamingo Rd # 542		<b>Transaction ID:</b> FF060515.0290004	
City State Zip Code Las Vegas NV 89121-4709	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFO REQUESTED Aggregate Year-to-Date ▼ 266.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	160.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 429 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jori Zabava

Mailing Address 11702 British Arms St

City State Zip Code  
San Antonio TX 78251-3328

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060515.0290005

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Karen A. Smith

Mailing Address 517 Calle Cuadra

City State Zip Code  
San Clemente CA 92673-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Innerstar

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060515.0300012

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Samuel H. Polischuk

Mailing Address 3125 Hemlock Rd

City State Zip Code  
Cape May NJ 08204-3737

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: FF060515.0300015

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 430 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Mark Marshall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 150 Chesapeake Dr		<b>Transaction ID:</b> FF060515.0400015
City State Zip Code Mc Kenzie TN 38201-8670	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer None Occupation Unemployed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James R. Payne		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 181 Little Johnson Valley Rd		<b>Transaction ID:</b> FF060515.0400024
City State Zip Code Kingston TN 37763-4703	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer 5r Processors Ltd. Occupation Electronics Tech		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Howard L. Hatfield		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 327 S Summit Ave		<b>Transaction ID:</b> FF060515.0400040
City State Zip Code Bremerton WA 98312-4223	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	340.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 431 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Margaretta H. Calvert

Mailing Address 41 Pond Ln

City State Zip Code  
Bryn Mawr PA 19010-1771

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 12 / 2006

Transaction ID: FF060515.0400049

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Brent M. Crymes

Mailing Address 450 University Dr

City State Zip Code  
Athens GA 30605-1554

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 12 / 2006

Transaction ID: FF060515.0400120

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Charles B. Boggs

Mailing Address 207 Lakewood Cir

City State Zip Code  
Greer SC 29651-5956

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 686.00

Date of Receipt  
05 / 12 / 2006

Transaction ID: FF060515.0410011

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 432 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Ms. Patrica A. Rumely

Mailing Address 12 Long Way

City State Zip Code  
**Hopewell NJ 08525-9740**

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 12 / 2006**

**Transaction ID: FF060515.0430007**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ionel Marsavela

Mailing Address PO Box 1548

City State Zip Code  
**Loma Linda CA 92354-1548**

FEC ID number of contributing federal political committee. **C**

Name of Employer M & T Trucking Co. Occupation Truck Driver

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **916.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 12 / 2006**

**Transaction ID: FF060515.0430008**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
Mr. Rowland A. Radford

Mailing Address 2 Nacoochee PI NW

City State Zip Code  
**Atlanta GA 30305-4164**

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 12 / 2006**

**Transaction ID: FF060515.0430016**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 433 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Patricia K. Del Bello

Mailing Address 6 Bermuda Rd

City State Zip Code  
Westport CT 06880-6701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060515.0430021

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert T. Girards

Mailing Address 641 Dacosta Ave

City State Zip Code  
Oceanside NY 11572-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Erginomic Group Exec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060515.0460001

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rosalie Abacherli

Mailing Address 413 Plumtree Dr

City State Zip Code  
Arvin CA 93203-1033

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060515.0500008

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 434 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel W. Wulff

Mailing Address 4924 N Elgin St

City State Zip Code  
Spokane WA 99205-5642

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      411.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060515.0500032

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Elizabeth J. Lukas

Mailing Address 266 Northwood Dr

City State Zip Code  
Lebanon PA 17042-8923

FEC ID number of contributing federal political committee. **C**

Name of Employer VA M.C.      Occupation Physician

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      301.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060515.0510003

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Wayman May

Mailing Address 1564 Kinsey Rd

City State Zip Code  
Dothan AL 36303-5856

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060515.0520041

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **635.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 435 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David A. Thompson

Mailing Address 538 Park Ave

City State Zip Code  
Quarryville PA 17566-9235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Quarryvillepresbyretiremen- Engineer  
ntcommunit

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 205.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060515.0520082

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ken R. Rees

Mailing Address 2261 Deborah Ln

City State Zip Code  
Edmond OK 73034-3065

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Heartland Exploratiion Self Employed

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060515.0540025

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard H. Sims

Mailing Address 5494 Singletree Ln

City State Zip Code  
Parker CO 80134-5316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060515.0550032

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 436 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Lois M. Hudson

Mailing Address 320 Ruby Ave

City State Zip Code  
Newport Beach CA 92662-1130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060515.0550052

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Leslie C. Brooks

Mailing Address 8 Clubview Dr

City State Zip Code  
Fairmont WV 26554-1212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060515.0550074

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Faye Hancock

Mailing Address 3014 Fm 2609

City State Zip Code  
Nacogdoches TX 75965-4864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 1551.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060515.0580001

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 437 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Fern R. King</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 701 E Village Creek Rd		<b>Transaction ID: FF060515.0580002</b>	
City State Zip Code Connersville IN 47331-3237	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ken L. Picard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4279 U S Highway 167		<b>Transaction ID: FF060515.0580006</b>	
City State Zip Code Maurice LA 70555-3703	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Venture Transport Logisti- cs LLC	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard W. Wright</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 636 Monroe Ave		<b>Transaction ID: FF060515.0580011</b>	
City State Zip Code Pittsburgh PA 15202-3542	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	390.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 438 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joseph N. Chairge		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 203 Clark Rd		<b>Transaction ID:</b> FF060515.0580016	
City State Zip Code Duryea PA 18642-1112	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Avoca Mach. Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2136.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David T. Burselson		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 9002 Rancich St		<b>Transaction ID:</b> FF060515.0580018	
City State Zip Code El Paso TX 79904-1029	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1320.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Trinidad Gamez		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 9000 Floyd Curl Dr Apt 107		<b>Transaction ID:</b> FF060515.0580020	
City State Zip Code San Antonio TX 78240-1588	Amount of Each Receipt this Period 116.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 697.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	286.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 439 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert M. Munson

Mailing Address 7224 25th St W

City Tacoma State WA Zip Code 98466-4708

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 292.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

**Transaction ID:** FF060515.0580032

Amount of Each Receipt this Period  
16.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Elbert C. Smith

Mailing Address PO Box 856

City Renton State WA Zip Code 98057-0856

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2291.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

**Transaction ID:** FF060515.0580033

Amount of Each Receipt this Period  
225.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gerald Robertson

Mailing Address 1908 Kenwyck Manor Way

City Raleigh State NC Zip Code 27612-6382

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

**Transaction ID:** FF060515.0590018

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>441.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 440 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Miss Monte F. Richardson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 36 Lambeth Dr		<b>Transaction ID:</b> FF060515.0590033	
City Asheville	State NC	Amount of Each Receipt this Period 200.00	
Zip Code 28803-3431		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 751.00			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Stanley A. Ryan		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 1383		<b>Transaction ID:</b> FF060515.0590059	
City Rainier	State OR	Amount of Each Receipt this Period 10.00	
Zip Code 97048-1383		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 241.00			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William O. Alden, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 440 Lightfoot Rd		<b>Transaction ID:</b> FF060515.0590066	
City Louisville	State KY	Amount of Each Receipt this Period 100.00	
Zip Code 40207-1854		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Hilliard Lyons	Occupation Broker	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	310.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 441 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Caleb S. Dano		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 562		Transaction ID: FF060515.0600016	
City State Zip Code Mahwah NJ 07430-0562	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 676.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Harry G. Davis		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 8301 Tieton Dr Unit 18		Transaction ID: FF060515.0600031	
City State Zip Code Yakima WA 98908-1437	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Edith Fleminberg		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 805 Londonderry Rd		Transaction ID: FF060515.0600059	
City State Zip Code Schenectady NY 12309-6419	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	325.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 442 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Patrica A. Rumely</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 12 Long Way		<b>Transaction ID: FF060515.0610004</b>	
City State Zip Code Hopewell NJ 08525-9740	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. James H. Trythall</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4331 Palisades Park Dr		<b>Transaction ID: FF060515.0610013</b>	
City State Zip Code Billings MT 59106-1344	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Small Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert B. Ferguson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 23072 Lake Center Dr Ste 205		<b>Transaction ID: FF060515.0610025</b>	
City State Zip Code Lake Forest CA 92630-2880	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Oil & Gas Exploration/prod		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 443 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Peter Sandaluk

Mailing Address 8470 Garvey Dr

City Raleigh State NC Zip Code 27616-3175

FEC ID number of contributing federal political committee. **C**

Name of Employer Nata Janitorial Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060515.0620014

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ronald W. Park

Mailing Address 17388 136th PI SE

City Monroe State WA Zip Code 98272-9764

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060515.0620036

Amount of Each Receipt this Period  
 75.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Woodrow C. Johnson

Mailing Address 11718 Hempstead Rd  
Box B-41

City Houston State TX Zip Code 77092-6023

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060515.0630020

Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 444 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Cirila Wolanski

Mailing Address 1832 S 26th St

City State Zip Code  
Milwaukee WI 53204-3047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cameo Care Center LPN

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 351.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

**Transaction ID:** FF060515.0650018

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Glen S. Wyman, Jr.

Mailing Address 8702 Lenox Ave SW

City State Zip Code  
Lakewood WA 98498-4639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 311.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

**Transaction ID:** FF060515.0650037

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Theodore R. Montuori

Mailing Address 110 Swanhill Ct

City State Zip Code  
Baltimore MD 21208-1607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Painter

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 302.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

**Transaction ID:** FF060515.0650052

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 445 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Joseph G. Katona</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 112 E Padonia Rd		<b>Transaction ID: FF060515.0650053</b>	
City State Zip Code Luthvle Timon MD 21093-2520	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. James W. Bland, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2525 Peachtree Rd NE Apt 30		<b>Transaction ID: FF060515.0650056</b>	
City State Zip Code Atlanta GA 30305-3670	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. James W. McFerrin</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 125 Beverly Rd NE		<b>Transaction ID: FF060515.0650058</b>	
City State Zip Code Atlanta GA 30309-2655	Amount of Each Receipt this Period 340.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Self Small Business Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	640.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 446 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Martha Law</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 933 Scenic Hwy		<b>Transaction ID: FF060515.0650060</b>	
City State Zip Code Lookout Mtn TN 37350-1429	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Frank M. Hagan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 620 Sand Hill Rd Apt 306D		<b>Transaction ID: FF060515.0650063</b>	
City State Zip Code Palo Alto CA 94304-2073	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 326.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Marilyn Hewlett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 5405 Leona Dr		<b>Transaction ID: FF060515.0650070</b>	
City State Zip Code New Iberia LA 70560-7961	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 447 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Richard S. Griffith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 3417 Milam St		<b>Transaction ID:</b> FF060515.0650074	
City State Zip Code Houston TX 77002-9531	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Richard S Griffiths	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 860.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Shirley M. Persing		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 500 N 8th St		<b>Transaction ID:</b> FF060515.0660005	
City State Zip Code Shamokin PA 17872-5302	Amount of Each Receipt this Period 305.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Shirley Rando Persing Real Estate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 905.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. James R. Brigham		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 24 Water Oak Dr		<b>Transaction ID:</b> FF060515.0660010	
City State Zip Code Hilton Head SC 29928-3009	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	505.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 448 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James A. De Ganahl

Mailing Address 655 Red Wing Dr

City State Zip Code  
Lake Mary FL 32746-5131

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060515.0660015

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles B. Stevenson

Mailing Address 1398 School St

City State Zip Code  
Indiana PA 15701-2567

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060515.0660019

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Thomas M. Moran

Mailing Address 10472 Frontenac Woods Ln

City State Zip Code  
Saint Louis MO 63131-3423

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060515.0660021

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	225.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 449 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Rosalie Abacherli</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 413 Plumtree Dr		<b>Transaction ID: FF060515.0660031</b>	
City State Zip Code Arvin CA 93203-1033	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Orlando Di Rienzo</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 49		<b>Transaction ID: FF060515.0660036</b>	
City State Zip Code Pottersville NJ 07979-0049	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Constance H. Stilwell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 425 Winn Way Apt 228		<b>Transaction ID: FF060515.0660044</b>	
City State Zip Code Decatur GA 30030-1734	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 450 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Edwin Carroll</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 73		<b>Transaction ID: FF060515.0670003</b>	
City <b>Marblemount</b>	State <b>WA</b>	Zip Code <b>98267-0073</b>	Amount of Each Receipt this Period 165.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 631.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Richard L. Muller</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 505 S 93rd Ave		<b>Transaction ID: FF060515.0670034</b>	
City <b>Omaha</b>	State <b>NE</b>	Zip Code <b>68114-5015</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert J. Gentile</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 7507 30th Ave		<b>Transaction ID: FF060515.0670046</b>	
City <b>East Elmhurst</b>	State <b>NY</b>	Zip Code <b>11370-1421</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	365.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 451 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Hoyte Eakes Mailing Address PO Box 140510 City Nashville State TN Zip Code 37214-0510 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 <b>Transaction ID:</b> FF060515.0670064 Amount of Each Receipt this Period 100.00
Name of Employer Occupation INFO REQUESTED INFO REQUESTED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 301.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Ray P. Oden, Jr. Mailing Address 702 Thora Blvd City Shreveport State LA Zip Code 71106-1824 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 <b>Transaction ID:</b> FF060515.0670065 Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 3250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Robert E. King Mailing Address 4630 60th St E City Bradenton State FL Zip Code 34203-9507 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 <b>Transaction ID:</b> FF060515.0680003 Amount of Each Receipt this Period 100.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 452 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. L. D. Brinkman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 1293		<b>Transaction ID: FF060515.0680011</b>	
City <b>Kerrville</b>	State <b>TX</b>	Zip Code <b>78029</b>	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Norma Marsh Wagner</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 21 Garrettsen Dr		<b>Transaction ID: FF060515.0680018</b>	
City <b>Belleville</b>	State <b>IL</b>	Zip Code <b>62223-3942</b>	Amount of Each Receipt this Period 565.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 565.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Helen Octavia Rand</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 908 Crescent Dr		<b>Transaction ID: FF060515.0680019</b>	
City <b>Saint Louis</b>	State <b>MO</b>	Zip Code <b>63105-2506</b>	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 665.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	940.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 453 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Sharon H. Barth</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2331 Carol Ave		<b>Transaction ID: FF060515.0680020</b>	
City State Zip Code Mountain View CA 94040-3812	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Piano Teacher Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Rusty Wilson</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 938		<b>Transaction ID: FF060515.0680023</b>	
City State Zip Code Sundown TX 79372-0938	Amount of Each Receipt this Period 450.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sundown Operating Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Aggregate Year-to-Date ▼ 451.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Jerry McReynolds</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1425 22nd Avenue Hts		<b>Transaction ID: FF060515.0680028</b>	
City State Zip Code Meridian MS 39301-6818	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A & B Component Parts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Manager Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 454 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Walter R. Umbach

Mailing Address 166 Seminary Dr

City State Zip Code  
Menlo Park CA 94025-3569

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060515.0680038

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
E. A. Hakim

Mailing Address PO Box 20826

City State Zip Code  
Rio Piedras PR 00928-0826

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060515.0690002

Amount of Each Receipt this Period  
201.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. R. Allan Blair, Sr.

Mailing Address PO Box 6402

City State Zip Code  
Baltimore MD 21230-0402

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060515.0690013

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	552.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 455 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Patricia G. Longo

Mailing Address 444 Thayer Pond Rd

City State Zip Code  
Wilton CT 06897-2406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: FF060515.0690034

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Joan Wheeler

Mailing Address 415 N Center Ave

City State Zip Code  
Somerset PA 15501-1401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: FF060515.0690044

Amount of Each Receipt this Period  
501.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert G. Greer

Mailing Address 708 Canterbury Dr

City State Zip Code  
Warrenton MO 63383-2246

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 223.50

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: FF060515.0690051

Amount of Each Receipt this Period  
51.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	653.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 456 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kamran Lalehpour

Mailing Address 117 W 9th St

City State Zip Code  
Los Angeles CA 90015-1509

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Insurance Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: FF060515.0700039

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Wilson E. Andrews

Mailing Address 6727 40th St NE

City State Zip Code  
Marysville WA 98270-6913

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: FF060515.0700048

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. J. Claude Brannan

Mailing Address RR 1 Box 238

City State Zip Code  
Marietta OK 73448-9731

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: FF060515.0700049

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	303.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 457 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gerald J. Riga		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 223 Gemstone Cir		<b>Transaction ID:</b> FF060515.0730005	
City Camdenton	State MO	Zip Code 65020-4827	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Mark Sprayberry		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2605 E Olive Rd		<b>Transaction ID:</b> FF060515.0730015	
City Pensacola	State FL	Zip Code 32514-6229	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Olive Road Animal Hospital	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Elizabeth J. Lukas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 266 Northwood Dr		<b>Transaction ID:</b> FF060515.0730035	
City Lebanon	State PA	Zip Code 17042-8923	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer VA M.C.	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 458 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. George S. Chey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 3266 Lowry Rd Ste 432		<b>Transaction ID:</b> FF060515.0740004	
City State Zip Code Los Angeles CA 90027-2207	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hanmi Bank	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Gerald Robertson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1908 Kenwyck Manor Way		<b>Transaction ID:</b> FF060515.0740052	
City State Zip Code Raleigh NC 27612-6382	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard W. McWhirter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 58 Buckskin Rd		<b>Transaction ID:</b> FF060515.0740065	
City State Zip Code Bell Canyon CA 91307-1123	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mcwhirter Dist Co.	Occupation Gasoline Distributor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 459 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Thomas D. Haines</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address <b>PO Box 549</b>		<b>Transaction ID: FF060515.0740073</b>	
City <b>Salisbury</b>	State <b>CT</b>	Zip Code <b>06068-0549</b>	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Howard E. Ellis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address <b>1808 E Warren Ave</b>		<b>Transaction ID: FF060515.0790006</b>	
City <b>Victoria</b>	State <b>TX</b>	Zip Code <b>77901-4229</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. George Parkman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address <b>PO Box 2029</b>		<b>Transaction ID: FF060515.0800021</b>	
City <b>Ruston</b>	State <b>LA</b>	Zip Code <b>71273-2029</b>	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Arkla Taylor Inc	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	251.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 460 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James W. Garland

Mailing Address 178 County Road 2137

City Pittsburg	State TX	Zip Code 75686-3772
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

Transaction ID: FF060515.0800024

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Fluckey, Jr.

Mailing Address 1746 32nd Ave

City San Francisco	State CA	Zip Code 94122-4102
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation Layed Off
------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

Transaction ID: FF060516.0020001

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James D. Russell

Mailing Address 1820 NE 104th Ave  
Apt 66

City Portland	State OR	Zip Code 97220-3819
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

Transaction ID: FF060516.0100002

Amount of Each Receipt this Period  
1600.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 461 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mabel M. Dowke

Mailing Address 2396 Pine St  
Apt 106

City San Francisco State CA Zip Code 94115-2737

FEC ID number of contributing federal political committee. **C**

Name of Employer Amcomm Systems Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2801.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060516.0120001

Amount of Each Receipt this Period  
375.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William L. Hinson

Mailing Address 270 Rabon Rd

City Columbia State SC Zip Code 29223-5821

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Cleaning Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060516.0130001

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Eddie Beltran

Mailing Address 13090 Park St

City Santa Fe Spgs State CA Zip Code 90670-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer Metal Finishing Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060516.0130009

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1025.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 462 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Norma T. Ellis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2744 Manorwood Trl		<b>Transaction ID: FF060516.0140001</b>	
City State Zip Code Fort Worth TX 76109-9589	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Gregory M. Wright</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 2763		<b>Transaction ID: FF060516.0150004</b>	
City State Zip Code Prescott AZ 86302-2763	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Paul G. Holsted</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 9871 Mammoth Dr		<b>Transaction ID: FF060516.0150005</b>	
City State Zip Code Huntingtn Bch CA 92646-5351	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 463 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Flowers

Mailing Address 4108 W 45th Ave

City State Zip Code  
Amarillo TX 79109-5518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
21 A-1 Western Realtors Realtor/broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: FF060516.0150008

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Tatnall Lea Hillman

Mailing Address 504 W Bleeker St

City State Zip Code  
Aspen CO 81611-1228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: FF060516.0150025

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Dennis L. Williams

Mailing Address PO Box 13600

City State Zip Code  
Burton WA 98013-3600

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Entrepreneur

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: FF060516.0150027

Amount of Each Receipt this Period  
400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 464 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ben Battle, Jr.

Mailing Address 9950 Sea Grape Cir

City State Zip Code  
Coral Gables FL 33156-3415

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** FF060516.0230003

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joe D. Kenworthy

Mailing Address 3800 W 71st St  
Apt 2111

City State Zip Code  
Tulsa OK 74132-2154

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0340010

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. June J. Stevens

Mailing Address 3936 Orchid Ave

City State Zip Code  
Kensett IA 50448-7564

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0340011

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 465 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Clifton Cabell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 540 W Main St		Transaction ID: FF060516.0340057	
City State Zip Code Hackberry LA 70645-4507	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Northrop Grumman Corp	Occupation Classified Security		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ralph Porco		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 768 Linda Dr		Transaction ID: FF060516.0340074	
City State Zip Code Pittsburgh PA 15226-1126	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William F. Turner		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1451 Rimpau Ave Ste 108		Transaction ID: FF060516.0350055	
City State Zip Code Corona CA 92879-7521	Amount of Each Receipt this Period 225.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	575.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 466 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert B. Rankin

Mailing Address 2 Sycamore St

City State Zip Code  
Beardstown IL 62618-8016

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0350057

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Irene D. Seaman

Mailing Address 8525 Park Shore Ln

City State Zip Code  
Sarasota FL 34238-3317

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0360030

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. H. Frank Gaines

Mailing Address 17506 Northridge Dr

City State Zip Code  
Neosho MO 64850-8741

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0370036

Amount of Each Receipt this Period  
35.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	285.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 467 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Thomas B. Larson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 275 Larkspur Ln		<b>Transaction ID: FF060516.0370079</b>	
City State Zip Code Mesquite NV 89027-6250	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Peter J. Mouriski</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 3575		<b>Transaction ID: FF060516.0380001</b>	
City State Zip Code Arnold CA 95223-3575	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Fred E. Guftafson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 16403 Excelsior Blvd		<b>Transaction ID: FF060516.0400002</b>	
City State Zip Code Minnetonka MN 55345-5305	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Resort Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 468 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Linnea Johnson		Date of Receipt MM / DD / YYYY 05 / 15 / 2006
Mailing Address 1781 Taylorsville Rd		<b>Transaction ID:</b> FF060516.0400010
City Taylorsville	State GA	Zip Code 30178-1602
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 300.00	
Name of Employer Janus International	Occupation Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Terry L. Adams		Date of Receipt MM / DD / YYYY 05 / 15 / 2006
Mailing Address 1300 W Front St		<b>Transaction ID:</b> FF060516.0400012
City Midland	State TX	Zip Code 79701-7003
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James W. Rogers		Date of Receipt MM / DD / YYYY 05 / 15 / 2006
Mailing Address 39 Dunes Rd		<b>Transaction ID:</b> FF060516.0400030
City Harwich Port	State MA	Zip Code 02646-2006
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00	
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 469 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Paul D. Nelson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 183		Transaction ID: FF060516.0410029	
City Gettysburg	State SD	Amount of Each Receipt this Period 400.00	
Zip Code 57442-0183		FEC ID number of contributing federal political committee. C	
Name of Employer Self	Occupation Farmer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 400.00			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James Osborne		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3555 188th St		Transaction ID: FF060516.0410038	
City Lansing	State IL	Amount of Each Receipt this Period 500.00	
Zip Code 60438-3505		FEC ID number of contributing federal political committee. C	
Name of Employer Solo Cup Co.	Occupation Electrician	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Diane Fehr		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 19 Riverview Dr		Transaction ID: FF060516.0410064	
City Morris	State MN	Amount of Each Receipt this Period 100.00	
Zip Code 56267-9475		FEC ID number of contributing federal political committee. C	
Name of Employer Self	Occupation Farmer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 470 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Lora M. Canter

Mailing Address 7836 Stonehenge Dr

City State Zip Code  
Chattanooga TN 37421-1136

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed  
Occupation Real Estate Salesman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060516.0410072

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry E. Rector

Mailing Address 1817 Willoway Cir N

City State Zip Code  
Columbus OH 43220-7507

FEC ID number of contributing federal political committee. **C**

Name of Employer State Of Ohio  
Occupation State Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060516.0420017

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Miss Evelyn L. Jackson

Mailing Address 27 Riverbend Dr

City State Zip Code  
Shelby OH 44875-1766

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired  
Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
476.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060516.0420065

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 471 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Janet A. Springer

Mailing Address 280 Upper Gulph Rd

City State Zip Code  
Strafford PA 19087-2416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 270.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0420085

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Heidi L. Quist

Mailing Address 4746 Lockner Dr

City State Zip Code  
Urbandale IA 50322-1800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pine Rest Christian Health Pys

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0420092

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ron M. Drey

Mailing Address 2530 Raleigh St

City State Zip Code  
Denver CO 80212-1215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0430022

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 472 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert A. Koestler

Mailing Address 9226 570th Ave

City State Zip Code  
Walters MN 56097-8210

FEC ID number of contributing federal political committee. **C**

Name of Employer Koestler Family Farm Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0430053

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Hugh Paul Nuckolls

Mailing Address PO Box 729

City State Zip Code  
Fort Myers FL 33902-0729

FEC ID number of contributing federal political committee. **C**

Name of Employer Nuckolls, Johnson, & Belcher, P.a. Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0430084

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Faith D. Alexander

Mailing Address PO Box 536

City State Zip Code  
Crescent City CA 95531-0536

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0470018

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	470.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 473 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Willis Johnson, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 7817		<b>Transaction ID: FF060516.0480001</b>	
City <b>Indian Lake Estate</b>	State <b>FL</b>	Zip Code <b>33855-7817</b>	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Rev. Ronald C. Lawson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 243 Neponset Ave		<b>Transaction ID: FF060516.0500027</b>	
City <b>Dorchester</b>	State <b>MA</b>	Zip Code <b>02122-3239</b>	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert D. Welchli</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 348 Provencal Rd		<b>Transaction ID: FF060516.0500028</b>	
City <b>Grosse Pointe Farm</b>	State <b>MI</b>	Zip Code <b>48236-2959</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mr Welchli Practice	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 702.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	535.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 474 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Raymond T. Litchfield

Mailing Address 1380 W Tanglewood Ct

City State Zip Code  
Hayden ID 83835-8805

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2006

**Transaction ID:** FF060516.0500034

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Albert N. Cecil, Jr.

Mailing Address 2457 Lakeview Cir

City State Zip Code  
Arlington TX 76013-3327

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼      325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2006

**Transaction ID:** FF060516.0500065

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Marjorie M. Wheeler

Mailing Address 800 SE 4th St  
Apt-601

City State Zip Code  
Fort Lauderdale FL 33301-2216

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼      305.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2006

**Transaction ID:** FF060516.0510023

Amount of Each Receipt this Period  
205.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	455.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 475 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Dr. Albert B. Kitchen, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 1035 River Ridge Dr		<b>Transaction ID: FF060516.0510032</b>	
City State Zip Code Augusta GA 30909-2211	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Joe R. Klutts</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address PO Box 81218		<b>Transaction ID: FF060516.0510058</b>	
City State Zip Code Lafayette LA 70598-1218	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Geologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 961.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Harvey L. Hardy</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 215 Atwater Dr		<b>Transaction ID: FF060516.0510078</b>	
City State Zip Code San Antonio TX 78213-3321	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Employed	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	375.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 476 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Jan F. Selby</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address <b>510 Broome St Apt 6E</b>		<b>Transaction ID: FF060516.0520006</b>	
City <b>New York</b>	State <b>NY</b>	Amount of Each Receipt this Period 200.00	
Zip Code <b>10013-1614</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer 2129664916	Occupation <b>Psycho Therapist</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Teresa Morris</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address <b>PO Box 126</b>		<b>Transaction ID: FF060516.0520013</b>	
City <b>Milton</b>	State <b>WV</b>	Amount of Each Receipt this Period 250.00	
Zip Code <b>25541-0126</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation <b>Self - Employed</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Manuel Gomez</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address <b>PO Box 497</b>		<b>Transaction ID: FF060516.0520030</b>	
City <b>Ronceverte</b>	State <b>WV</b>	Amount of Each Receipt this Period 150.00	
Zip Code <b>24970-0497</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation <b>Physician</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 477 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Harold R. Logan		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3172 SE Fairway W		<b>Transaction ID:</b> FF060516.0520058	
City State Zip Code Stuart FL 34997-6045	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Andrew E. Scott		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2486 Crystal Lake Dr		<b>Transaction ID:</b> FF060516.0520059	
City State Zip Code Spring Hill FL 34606-7043	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Betty Jean Anderson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 222 Norman Dr		<b>Transaction ID:</b> FF060516.0530005	
City State Zip Code Cranberry Twp PA 16066-4233	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 353.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 478 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. R. Heath Larry

Mailing Address 4333 N Ocean Blvd  
Apt. A S 3

City Delray Beach State FL Zip Code 33483-7559

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0530008

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard F. Miller

Mailing Address 1840 Tarpon Ln  
Apt D105

City Vero Beach State FL Zip Code 32960-4210

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0530021

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Reginald R. Thomas

Mailing Address 174 Bengueyfield Dr

City East Williston State NY Zip Code 11596-1405

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0530033

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	480.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 479 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Paul De Cleva</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 400 N Saint Paul St		<b>Transaction ID: FF060516.0530042</b>	
City State Zip Code Dallas TX 75201-3114	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Self	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Ms. Ruth B. Carrington</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 102 W Poplar St		<b>Transaction ID: FF060516.0540001</b>	
City State Zip Code Greencastle IN 46135-1636	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard E. Brainard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 100 Longstone Dr		<b>Transaction ID: FF060516.0540020</b>	
City State Zip Code Cherry Hill NJ 08003-1974	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 480 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Harry Knobbe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 595 15th Rd		Transaction ID: FF060516.0540021	
City State Zip Code West Point NE 68788-4060	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Livestock,commodities, Feed Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. W. Greg Howington		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 6120 Powers Ferry Rd NW Ste 130		Transaction ID: FF060516.0540029	
City State Zip Code Atlanta GA 30339-2948	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer W Greg Howington Inc Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFO REQUESTED Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Jeneanne B. Lewis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1001 Northbridge Ln		Transaction ID: FF060516.0540041	
City State Zip Code Chattanooga TN 37405-4242	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 401.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	575.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 481 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William R. Prickett

Mailing Address 12662 Strathmore Dr

City State Zip Code  
Garden Grove CA 92840-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 497.50

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0540058

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sandra M. Hutchins

Mailing Address 49 Bruce Rd

City State Zip Code  
Bangor ME 04401-3201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0550036

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles A. Pollock

Mailing Address 1500 N Lake Shore Dr

City State Zip Code  
Chicago IL 60610-6686

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0550057

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 482 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edwin S. Baldwin

Mailing Address 1 Metropolitan Sq  
Ste 2600

City State Zip Code  
Saint Louis MO 63102-2793

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Armstrong Teasdale Llp Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
326.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0560003

Amount of Each Receipt this Period  
225.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Jacqueline Smith

Mailing Address 329 Putnam Ave

City State Zip Code  
Zanesville OH 43701-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
646.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0560009

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Claire J. McConnell

Mailing Address 319 W Main St

City State Zip Code  
Melrose MN 56352-1065

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
401.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0560017

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>365.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 483 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Alice J. Wilks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3841 Greenridge		<b>Transaction ID:</b> FF060516.0560025	
City State Zip Code Cibolo TX 78108-2212	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Delbert E. Glaser		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 31997 Sand Ridge Rd		<b>Transaction ID:</b> FF060516.0560047	
City State Zip Code Lebanon OR 97355-9232	Amount of Each Receipt this Period 240.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 631.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Perren L. Baker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3109 Buckingham Ct		<b>Transaction ID:</b> FF060516.0560051	
City State Zip Code Modesto CA 95350-1504	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	590.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 484 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joseph Farley		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 1798		<b>Transaction ID:</b> FF060516.0570007	
City Hamilton	State MT	Amount of Each Receipt this Period 25.00	
Zip Code 59840-1798		Transaction ID: FF060516.0570007	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 25.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00	Amount of Each Receipt this Period 25.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James A. Voor		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1441 Wakefield Ter		<b>Transaction ID:</b> FF060516.0570026	
City Titusville	State FL	Amount of Each Receipt this Period 30.00	
Zip Code 32796-1652		Transaction ID: FF060516.0570026	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 30.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	Amount of Each Receipt this Period 30.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Col. Thurman Spiva		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 8520 Hans Engel Way		<b>Transaction ID:</b> FF060516.0570041	
City Fair Oaks	State CA	Amount of Each Receipt this Period 215.00	
Zip Code 95628-6209		Transaction ID: FF060516.0570041	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 215.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 215.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 860.00	Amount of Each Receipt this Period 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	270.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	270.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 485 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Hardin, Jr.  
Mailing Address 410 Briarwood Dr  
City State Zip Code  
Shreveport LA 71106-1804  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Louisiana State Medical School Physician  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6  
Transaction ID: FF060516.0570052  
Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Roy R. Priest, Jr.  
Mailing Address 3242 Golfing Green Pl  
City State Zip Code  
Dallas TX 75234-3760  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Retired Retired  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6  
Transaction ID: FF060516.0570053  
Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rose Papadopoulos  
Mailing Address 445 West St  
City State Zip Code  
Harrison NY 10528-2506  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Izzo Electric, Inc. Bookkeeper  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6  
Transaction ID: FF060516.0580001  
Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 700.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 486 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas E. Olp

Mailing Address 4234 N Thorne Ave

City State Zip Code  
Fresno CA 93704-3520

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0580013

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Douglas C. Robinson

Mailing Address 757 NW Meadowood Cir

City State Zip Code  
McMinnville OR 97128-9533

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0580033

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stanley Maskiewicz

Mailing Address 1238 Gooseberry Ct

City State Zip Code  
Sunnyvale CA 94087-2018

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0580063

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 290.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 487 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bruce Lee

Mailing Address 115 E 67th St

City State Zip Code  
New York NY 10021-5951

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0590001

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ira W. Robinson

Mailing Address 201 S 3rd St

City State Zip Code  
Bayboro NC 28515-9725

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 526.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0590026

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. George L. Wrenn

Mailing Address PO Box 247

City State Zip Code  
Freedom NH 03836-0247

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 676.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0590027

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 488 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Louise Barbeck		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 3301 Greenbrier Dr		<b>Transaction ID:</b> FF060516.0590038	
City State Zip Code Dallas TX 75225-4818	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Dean W. Rasmuson		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 7391 Prairie Falcon Rd Ste 150		<b>Transaction ID:</b> FF060516.0590043	
City State Zip Code Las Vegas NV 89128-0816	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Orion Engineering & Surveying President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John C. Thrash		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 10000 Memorial Dr Ste 250 Ste. 250		<b>Transaction ID:</b> FF060516.0590053	
City State Zip Code Houston TX 77024-3444	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation E-corp Usa Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 489 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Cecelia I. O'Donnell		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 15142 SW 25th St Ste 104		<b>Transaction ID:</b> FF060516.0590057	
City State Zip Code Davie FL 33326-2050	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Diagnostics Plus	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2350.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. John F. Marshall		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 8787 Bay Colony Dr Apt 503		<b>Transaction ID:</b> FF060516.0600003	
City State Zip Code Naples FL 34108-0782	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. R. A. Humphrey		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 9115 Fortuna Dr Apt 6225		<b>Transaction ID:</b> FF060516.0600027	
City State Zip Code Mercer Island WA 98040-3156	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 490 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Thomas F. Popp		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 5633 S Prescott St		<b>Transaction ID:</b> FF060516.0600042	
City State Zip Code Littleton CO 80120-1212	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Warren G. Keinath, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 12342 Creekhaven Dr		<b>Transaction ID:</b> FF060516.0600045	
City State Zip Code Saint Louis MO 63131-3825	Amount of Each Receipt this Period 550.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Phyllis E.D. Brooks		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 1536 NW 57th St		<b>Transaction ID:</b> FF060516.0600049	
City State Zip Code Gainesville FL 32605-6423	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 491 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Goff Smith

Mailing Address 903 Private Rd

City State Zip Code  
Winnetka IL 60093-1525

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0600055

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Phillip S. Miller

Mailing Address 11 E North St

City State Zip Code  
Danville IL 61832-5803

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0610004

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Eleazar V. Martinez

Mailing Address 324 C St Apt 177

City State Zip Code  
Chula Vista CA 91910-1060

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0610007

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	630.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 492 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Capt. John G. Saittis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 5411 Barclay Ave		<b>Transaction ID:</b> FF060516.0610017	
City Brooksville	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 34609-8710			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Cecily Taylor		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 39206 Guardino Dr Apt 210		<b>Transaction ID:</b> FF060516.0610028	
City Fremont	State CA	Amount of Each Receipt this Period 200.00	
Zip Code 94538-3026			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Arden L. Boren		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2392 Bateman Ave		<b>Transaction ID:</b> FF060516.0610031	
City Irwindale	State CA	Amount of Each Receipt this Period 150.00	
Zip Code 91010-3312			
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific National Group	Occupation Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 493 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Rafael Rene Muniz</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 40841		<b>Transaction ID: FF060516.0610037</b>	
City San Francisco	State CA	Amount of Each Receipt this Period 115.00	
Zip Code 94140-0841		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 486.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Ms. Stella V. Pautienis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 4411 Los Feliz Blvd Apt 608		<b>Transaction ID: FF060516.0610053</b>	
City Los Angeles	State CA	Amount of Each Receipt this Period 375.00	
Zip Code 90027-2142		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 1076.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Julio Valdivieso</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 40472		<b>Transaction ID: FF060516.0610054</b>	
City Downey	State CA	Amount of Each Receipt this Period 40.00	
Zip Code 90239-1472		FEC ID number of contributing federal political committee. C	
Name of Employer Eme Inc.	Occupation Salesman	Aggregate Year-to-Date ▼ 216.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	530.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 494 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William C. Roberts

Mailing Address 2307 S Forest Estates Dr

City State Zip Code  
Spokane WA 99223-3403

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0610063

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James Powell

Mailing Address 10 Johnson Dr

City State Zip Code  
Canton NC 28716-4824

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0610071

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Vernal F. Hoston, Jr.

Mailing Address 6138 Ridgeacres Dr Apt B

City State Zip Code  
Cincinnati OH 45237-4919

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0620016

Amount of Each Receipt this Period  
60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>310.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 495 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Calvin C. Goodrich

Mailing Address 40 Dorino Pl

City State Zip Code  
Cincinnati OH 45215-2629

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060516.0620019

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert T. Lawson

Mailing Address 73 Columbia Ave

City State Zip Code  
Hampton VA 23669-4120

FEC ID number of contributing federal political committee. **C**

Name of Employer W.m. Jordan Co Inc. Occupation General Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060516.0620027

Amount of Each Receipt this Period  
155.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Theodore R. Beatty

Mailing Address 31568 Anna Ln

City State Zip Code  
Bay Village OH 44140-1002

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060516.0620032

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 305.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 496 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John E. Akitt

Mailing Address 26671 Rookery Lake Dr

City State Zip Code  
Bonita Spgs FL 34134-5645

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060516.0630015

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Fe Urena

Mailing Address 275 Fort Washington Ave  
Apt 4C

City State Zip Code  
New York NY 10032-1234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Clarife Testing Corp. Clinical Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060516.0630027

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Joseph Parrillo

Mailing Address 1 Cooper Plz

City State Zip Code  
Camden NJ 08103-1461

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cooper University Hospital Cardiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060516.0630033

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 497 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert N. Jorgensen

Mailing Address 35 Webhannet Harbour Rd

City Wells State ME Zip Code 04090-4636

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Antique Dealer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: FF060516.0630038

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Edward C. Baltz

Mailing Address 6732 Locksley Dr

City Tuscaloosa State AL Zip Code 35406-2901

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: FF060516.0640007

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Marge A. Mullin

Mailing Address 104 Villa Way

City Yorktown State VA Zip Code 23693-3207

FEC ID number of contributing federal political committee. **C**

Name of Employer home maker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: FF060516.0640034

Amount of Each Receipt this Period  
105.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 280.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 498 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Walter L. Brown</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 11517 Sturbridge Ct		<b>Transaction ID: FF060516.0640038</b>	
City State Zip Code Fredericksbrg VA 22407-7699	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Dean Freytag</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1405 Township Road 523		<b>Transaction ID: FF060516.0640064</b>	
City State Zip Code Ashland OH 44805-9770	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Anna Spacek</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 967 La Senda		<b>Transaction ID: FF060516.0640065</b>	
City State Zip Code Santa Barbara CA 93105-4512	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Spacek Labs	Occupation Office Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 499 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Martha Ayers Fuentes

Mailing Address 102 3rd St

City State Zip Code  
Belleair Beach FL 33786-3211

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Freelance Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: FF060516.0640074

Amount of Each Receipt this Period  
60.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Cass

Mailing Address 1598 Golfside Village Blvd

City State Zip Code  
Apopka FL 32712-2162

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: FF060516.0690007

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jacob F. Giesbrecht

Mailing Address PO Box 2528

City State Zip Code  
Presidio TX 79845-2528

FEC ID number of contributing federal political committee. **C**

Name of Employer Bullet Transport Inc Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: FF060516.0690031

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	62.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 500 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William G. Thomas

Mailing Address 1603 Roseneath Dr

City State Zip Code  
Baton Rouge LA 70806-8564

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0700008

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bob L. Pacheco

Mailing Address 9903 Titan Ct  
Unit 10

City State Zip Code  
Littleton CO 80125-9353

FEC ID number of contributing federal political committee. **C**

Name of Employer Protech Sales Inc. Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0700038

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Starke

Mailing Address 18395 SW 293rd St

City State Zip Code  
Homestead FL 33030-3028

FEC ID number of contributing federal political committee. **C**

Name of Employer F B Suppressors Inc. Occupation  
Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0700040

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 501 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Christine S. Tyner</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 1414 Crooked Stick Loop		<b>Transaction ID: FF060516.0700070</b>	
City State Zip Code Lakeland FL 33801-0591	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Christine Tyner Real Estate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Gladys S. Leach</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 5 Greenlawn Dr		<b>Transaction ID: FF060516.0700082</b>	
City State Zip Code Pittsburgh PA 15220-2502	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer G & W Leach	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 751.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary Puccio</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 24 E Main St		<b>Transaction ID: FF060516.0710013</b>	
City State Zip Code Bay Shore NY 11706-8301	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Info Requested	Occupation Info Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 502 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Arthur E. Flegel

Mailing Address 1895 Oakdell Dr

City State Zip Code  
Menlo Park CA 94025-6167

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0710021

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard C. Witte

Mailing Address 596 Abilene Trl

City State Zip Code  
Cincinnati OH 45215-2555

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1076.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0710032

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jerry S. Drabicki

Mailing Address 593 N Seward Ave

City State Zip Code  
Auburn NY 13021-2105

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0710033

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 503 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Garth C. Myers		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 349		<b>Transaction ID:</b> FF060516.0710055	
City State Zip Code Ganado TX 77962-0349	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles B. Holmes		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 9541 Russell Ave S		<b>Transaction ID:</b> FF060516.0720023	
City State Zip Code Minneapolis MN 55431-2433	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. D. L. Crumbley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1402 Applewood Rd		<b>Transaction ID:</b> FF060516.0720034	
City State Zip Code Baton Rouge LA 70808-5905	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer L S. U.	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	303.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 504 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Wilho E. Williams

Mailing Address 2331 E 34th Ave

City State Zip Code  
Spokane WA 99223-4614

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 217.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0720044

Amount of Each Receipt this Period  
102.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Mildred A. Thompson

Mailing Address 12897 E Arkansas Dr

City State Zip Code  
Aurora CO 80012-4324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 626.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0720055

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Carol S. Mahony

Mailing Address 670 Lake Dr

City State Zip Code  
Vero Beach FL 32963-2165

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0720069

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	403.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 505 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Howard A. Pearl

Mailing Address 1191 Center Point Dr  
Ste D

City Henderson State NV Zip Code 89074-7891

FEC ID number of contributing federal political committee. **C**

Name of Employer Rhino Off-road Industries Inc. Occupation Ceo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0730044

Amount of Each Receipt this Period  
26.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John J. Casey

Mailing Address 4450 E Camelback Rd  
No 2

City Phoenix State AZ Zip Code 85018-2829

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0730059

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Audrey Robin Wylie

Mailing Address 1901 Marathon Rd

City Abilene State TX Zip Code 79601-2669

FEC ID number of contributing federal political committee. **C**

Name of Employer Tri Star Home Care Occupation Rn/adm/dops

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0730063

Amount of Each Receipt this Period  
201.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **328.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 506 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph Farley

Mailing Address PO Box 1798

City State Zip Code  
Hamilton MT 59840-1798

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0730076

Amount of Each Receipt this Period  
26.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Titus Ricks, Jr.

Mailing Address 1512 Crystal Lake Dr

City State Zip Code  
Portsmouth VA 23701-3624

FEC ID number of contributing federal political committee. **C**

Name of Employer Barcelo Crestline Corp Occupation Dishwasher/maintenance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0740003

Amount of Each Receipt this Period  
26.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert C. Lewis, Jr.

Mailing Address 12 Brandywood Dr

City State Zip Code  
Pepper Pike OH 44124-5501

FEC ID number of contributing federal political committee. **C**

Name of Employer Welded Tubes Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0740018

Amount of Each Receipt this Period  
751.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	803.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 507 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Allan C. Gocio		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 305 W Jackson St Ste 301		<b>Transaction ID:</b> FF060516.0740042	
City State Zip Code Carbondale IL 62901-1474	Amount of Each Receipt this Period 301.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Neurological Surgeons Of South Illinois	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 801.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Grace L. Meek		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 1320 Frederick St Apt A		<b>Transaction ID:</b> FF060516.0740051	
City State Zip Code Independence MO 64050-3161	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Francis W. Bock		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 2735 S 44th St		<b>Transaction ID:</b> FF060516.0740055	
City State Zip Code Milwaukee WI 53219-3203	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	603.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 508 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth Quagenti

Mailing Address 51 Miller Rd

City Farmingdale State NY Zip Code 11735-2040

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2001.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0740056

Amount of Each Receipt this Period  
 101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John Nannini, Sr.

Mailing Address 1161 S Northpoint Blvd

City Waukegan State IL Zip Code 60085-8216

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Owner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0740062

Amount of Each Receipt this Period  
 201.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jane Mueller

Mailing Address 9931 Wolff Dr

City Saint Louis State MO Zip Code 63123-6209

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060516.0740066

Amount of Each Receipt this Period  
 76.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>378.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 509 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. George C. Chao		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 11207 Queens Blvd		<b>Transaction ID:</b> FF060516.0740075	
City State Zip Code Forest Hills NY 11375-5554	Amount of Each Receipt this Period 151.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Alexander Chao D.d. S., P. C.	Occupation Administrative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. H. Guy Hardy		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 12700 Lake Ave Apt 613		<b>Transaction ID:</b> FF060516.0750001	
City State Zip Code Cleveland OH 44107-1547	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Philip A. McDonald		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2120 Markham Way		<b>Transaction ID:</b> FF060516.0750007	
City State Zip Code Sacramento CA 95818-3140	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	231.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 510 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ray Cannon

Mailing Address 760 S Sunny Slope Rd

City State Zip Code  
Brookfield WI 53005-4172

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0750010

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Claude Sharrieff-Frazier

Mailing Address 309 W 136th St

City State Zip Code  
New York NY 10030-2402

FEC ID number of contributing federal political committee. **C**

Name of Employer Windows Over Harlem Rest & Cater. Inc. Occupation Chief Financial Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 227.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0750014

Amount of Each Receipt this Period  
76.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jacqueline Smith

Mailing Address 329 Putnam Ave

City State Zip Code  
Zanesville OH 43701-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 646.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0750015

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	136.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 511 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Jacqueline Smith

Mailing Address 329 Putnam Ave

City State Zip Code  
Zanesville OH 43701-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 646.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0750016

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Jacqueline Smith

Mailing Address 329 Putnam Ave

City State Zip Code  
Zanesville OH 43701-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 646.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0750017

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ethel M. Mayfield

Mailing Address 617 Sumner St

City State Zip Code  
Carlinville IL 62626-1364

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: FF060516.0750023

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 512 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Margaret F. Kanppenberger

Mailing Address 3299 Norwood Rd

City State Zip Code  
Shaker Heights OH 44122-3439

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 831.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0750025

Amount of Each Receipt this Period  
80.00

**B.** Full Name (Last, First, Middle Initial)  
Loren Elgin

Mailing Address PO Box 427

City State Zip Code  
Camp Wood TX 78833-0427

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0750026

Amount of Each Receipt this Period  
80.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Louise V. Collins

Mailing Address 9037 Gaymont Ave

City State Zip Code  
Downey CA 90240-2646

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 396.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060516.0750033

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>170.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 513 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Robert C. Coats</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 4211 Garibaldi Ave		<b>Transaction ID: FF060516.0750035</b>	
City State Zip Code Jacksonville FL 32210-8513	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Betty M. Smith</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1101 Smithland Bnd		<b>Transaction ID: FF060516.0750046</b>	
City State Zip Code Anderson SC 29621-5091	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. J. Claude Brannan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address RR 1 Box 238		<b>Transaction ID: FF060516.0750051</b>	
City State Zip Code Marietta OK 73448-9731	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Rancher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 514 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert W. Beard		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 104 Bass Ave		<b>Transaction ID:</b> FF060516.0750055	
City State Zip Code Gloucester MA 01930-3162	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sag-aftra	Occupation Actor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. George A.H. Bird		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 31 Muscogee Ave NW Apt 14		<b>Transaction ID:</b> FF060516.0750061	
City State Zip Code Atlanta GA 30305-3577	Amount of Each Receipt this Period 201.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 902.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Norma Zubiri		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2050 N 16th St		<b>Transaction ID:</b> FF060516.0750064	
City State Zip Code Phoenix AZ 85006-1961	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Notary Income. Tax LLC	Occupation Info Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	376.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 515 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Lawrence W. Desanto</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 8122 E Clinton St		<b>Transaction ID: FF060516.0760004</b>	
City State Zip Code Scottsdale AZ 85260-6566	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Marjorie A. Furr</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1804 S Weimer Rd		<b>Transaction ID: FF060516.0760017</b>	
City State Zip Code Bloomington IN 47403-2870	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas Mathew</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1000 1st St E		<b>Transaction ID: FF060516.0760034</b>	
City State Zip Code Humble TX 77338-4924	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer North East Rehab Center	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 516 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Joseph S. McKell		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 17 Overlook Dr		<b>Transaction ID:</b> FF060516.0760035	
City Chillicothe	State OH	Zip Code 45601-1926	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Joseph S McKell, MD	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Edward S. Martin		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 1046 Woodberry Rd		<b>Transaction ID:</b> FF060516.0760042	
City New Kensington	State PA	Zip Code 15068-5308	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William G. Wall		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 16802 E Caley Ave		<b>Transaction ID:</b> FF060516.0760059	
City Centennial	State CO	Zip Code 80016-1005	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 517 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Karl R. Olsen

Mailing Address 410 Jamesborough Dr

City State Zip Code  
Pittsburgh PA 15238-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retina Vitreous Consultants Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 402.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	6

**Transaction ID:** FF060516.0760063

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Anna M. Howard

Mailing Address 6430 Millikin Rd

City State Zip Code  
Liberty Township OH 45044-9217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 203.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	6

**Transaction ID:** FF060516.0760067

Amount of Each Receipt this Period  
202.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Susan S. Jones

Mailing Address 450 Rosemeade Ln

City State Zip Code  
Naples FL 34105-7154

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	6

**Transaction ID:** FF060516.0770031

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **552.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 518 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. J. S. Van Alsburg		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006
Mailing Address 2831 Terry Lake Rd		<b>Transaction ID:</b> FF060516.0780006
City State Zip Code Fort Collins CO 80524-1378	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Prairie Tank & Const	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William Millsbaugh		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006
Mailing Address 254 Sequoia Ct Apt 17		<b>Transaction ID:</b> FF060516.0780015
City State Zip Code Thousand Oaks CA 91360-3816	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 901.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. R. Alan Hanson		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006
Mailing Address 1265 Paseo Redondo		<b>Transaction ID:</b> FF060516.0780020
City State Zip Code Burbank CA 91501-1654	Amount of Each Receipt this Period 210.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 620.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	510.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 519 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lydia F. Soriano

Mailing Address PO Box 4376

City State Zip Code  
Cerritos CA 90703-4376

FEC ID number of contributing federal political committee. **C**

Name of Employer MSM Marketing Services Occupation Broker/realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0780032

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Delton P. Stevens

Mailing Address 5859 Central Ave

City State Zip Code  
Bonita CA 91902-2840

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Financial Planner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0780037

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marilyn J. Boye

Mailing Address 1528 SW 99th Ter

City State Zip Code  
Davie FL 33324-6433

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0780050

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 520 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Mary Ellen Muller</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 691 Irolo St Apt 602		<b>Transaction ID: FF060516.0780061</b>	
City State Zip Code Los Angeles CA 90005-4105	Amount of Each Receipt this Period 225.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Sabino Farinaccia</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 852 59th St		<b>Transaction ID: FF060516.0780085</b>	
City State Zip Code Brooklyn NY 11220-3612	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Jenaire N. Lewandowski</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 326 Dartmouth St Apt 3		<b>Transaction ID: FF060516.0790002</b>	
City State Zip Code Boston MA 02116-1812	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 521 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Shanchen F. Ting		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 200 Winston Dr Apt 2209		<b>Transaction ID:</b> FF060516.0790003 Amount of Each Receipt this Period 450.00
City State Zip Code Cliffside Pk NJ 07010-3226	FEC ID number of contributing federal political committee. C	
Name of Employer Self	Occupation Marine Transportation	Amount of Each Receipt this Period 450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. E. Marvin Johnson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address PO Box 100		<b>Transaction ID:</b> FF060516.0790018 Amount of Each Receipt this Period 250.00
City State Zip Code Raeford NC 28376-0100	FEC ID number of contributing federal political committee. C	
Name of Employer Self	Occupation Poultry Farming & Processing	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Dolores Schultz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 5411 W 62nd St		<b>Transaction ID:</b> FF060516.0790039 Amount of Each Receipt this Period 200.00
City State Zip Code Los Angeles CA 90056-2005	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 522 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Betsy B. Edwards

Mailing Address 4215 Harding Pike  
Apt. 1110

City Nashville State TN Zip Code 37205-2033

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	6

**Transaction ID:** FF060516.0800003

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Marion S. Yerkes, Jr.

Mailing Address 3679 Blackfoot Ct SW

City Grandville State MI Zip Code 49418-1721

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
551.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	6

**Transaction ID:** FF060516.0810010

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Anthony J. Lund, MD

Mailing Address 103 Rio Vis

City Los Gatos State CA Zip Code 95032-1169

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	6

**Transaction ID:** FF060516.0820001

Amount of Each Receipt this Period  
55.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	605.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 523 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Mildred A. Thompson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 12897 E Arkansas Dr		<b>Transaction ID:</b> FF060516.0820035	
City Aurora	State CO	Zip Code 80012-4324	Amount of Each Receipt this Period 105.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 626.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Frank I. Calvert		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3750 S Old Spanish Trl		<b>Transaction ID:</b> FF060516.0820040	
City Tucson	State AZ	Zip Code 85730-5638	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David R. Schad		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 424 Masonic Dr		<b>Transaction ID:</b> FF060516.0830007	
City York	State PA	Zip Code 17402-1218	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bennett Williams Realty Inc.	Occupation Real Estate Commercial Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1101.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	555.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 524 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John V. Gibson

Mailing Address PO Box 5471

City State Zip Code  
Bay Shore NY 11706-0336

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0830020

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Gertrude Blumenschein, MD

Mailing Address PO Box 377

City State Zip Code  
Chalk Hill PA 15421-0377

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0830034

Amount of Each Receipt this Period  
180.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jake Renfro, SR.

Mailing Address PO Box 17977

City State Zip Code  
Pensacola FL 32522-7977

FEC ID number of contributing federal political committee. **C**

Name of Employer Renfro Pecan company Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0830047

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1430.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 525 / 2352  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dan Saxton

Mailing Address 2560 Mermaid Ave

City State Zip Code  
Wantagh NY 11793-4406

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0830049

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John H. F. Haskell, Jr.

Mailing Address 535 Madison Ave  
Fl 4

City State Zip Code  
New York NY 10022-4291

FEC ID number of contributing federal political committee. **C**

Name of Employer Ubs Occupation Senior Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1670.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060516.0830064

Amount of Each Receipt this Period  
1670.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Reuben H. Wilson

Mailing Address 10101 W Palmeras Dr  
Apt 223

City State Zip Code  
Sun City AZ 85373-3011

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0050019

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1770.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 526 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Mary K. Hackerman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 3402 Ella Lee Ln		<b>Transaction ID: FF060517.0050043</b>	
City State Zip Code Houston TX 77027-4141	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Andrew M. Sutton</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address PO Box 314		<b>Transaction ID: FF060517.0070077</b>	
City State Zip Code Mount Prospect IL 60056-0314	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 426.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Herbert F. Ohmeis, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 698 NE Spanish River Blvd		<b>Transaction ID: FF060517.0080004</b>	
City State Zip Code Boca Raton FL 33431-6170	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 527 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Aleta O. O'Neal

Mailing Address 3743 Glen Haven Blvd

City State Zip Code  
Houston TX 77025-1204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0080017

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Mary Ellen Loyd

Mailing Address 1102 Wedgewood PI

City State Zip Code  
Newton KS 67114-4559

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0080037

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Cecile Kume

Mailing Address 1510 11th Ave S  
Apt 502

City State Zip Code  
Minneapolis MN 55404-1781

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0080044

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 528 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Mandy L. King</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 15160 N Hayden Rd Ste 100		<b>Transaction ID: FF060517.0080051</b>	
City State Zip Code Scottsdale AZ 85260-2585	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Re/max Excalibur Realty	Occupation Sales Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Phyllis I. Hill</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 105 Wactor St		<b>Transaction ID: FF060517.0090003</b>	
City State Zip Code Sumter SC 29150-4544	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1126.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Kenneth Colliton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 8 Stoner Dr		<b>Transaction ID: FF060517.0110036</b>	
City State Zip Code West Hartford CT 06107-1331	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer New Britain Anesthesia, PC	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	525.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 529 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gerry A. Tucker

Mailing Address 1111 S 12th St

City State Zip Code  
Grand Junction CO 81501-3820

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0120003

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Donald P. Lines

Mailing Address 636 N Navy Blvd

City State Zip Code  
Pensacola FL 32507-1242

FEC ID number of contributing federal political committee. **C**

Name of Employer nappa natt's car care center Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0120004

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roger L. Jasken

Mailing Address 22153 County Road 155

City State Zip Code  
Ogema MN 56569-9671

FEC ID number of contributing federal political committee. **C**

Name of Employer Jasken Brothers Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0120005

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 530 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Donald J. Van De Steene		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3105 McKail Rd		<b>Transaction ID:</b> FF060517.0120007	
City State Zip Code Bruce MI 48065-1021	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ag Edwards & Sons Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Shri Arbind		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 125 W Keen St		<b>Transaction ID:</b> FF060517.0120008	
City State Zip Code Kissimmee FL 34741-1725	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Osceola Transmission Whse. & Au.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Frank N. Genovese		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address RR 7 Box 447		<b>Transaction ID:</b> FF060517.0120009	
City State Zip Code Kittanning PA 16201-7537	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Genovese Ophthalmic Associates	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1151.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 531 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. M. E. Kelly</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 2742 Fair Oaks Cir		<b>Transaction ID: FF060517.0120012</b>	
City State Zip Code Odessa TX 79762-8010	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Vesta Jane Armstrong</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 160 Meador Ln		<b>Transaction ID: FF060517.0130001</b>	
City State Zip Code Stephenville TX 76401-3914	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Margot L. Griggs</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 3 Tyler Ct		<b>Transaction ID: FF060517.0130002</b>	
City State Zip Code Northampton MA 01060-2107	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 532 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Phyllis I. Hill		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 105 Wactor St		<b>Transaction ID:</b> FF060517.0130003	
City State Zip Code Sumter SC 29150-4544	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1126.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. G. Edward Cusick, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 897 Fording Island Rd Apt 1602		<b>Transaction ID:</b> FF060517.0130004	
City State Zip Code Bluffton SC 29910-8805	Amount of Each Receipt this Period 66.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Employed	Occupation Disabled		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Roland R. Rohde		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address N7953 State Road 44		<b>Transaction ID:</b> FF060517.0130005	
City State Zip Code Pardeeville WI 53954-9409	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	716.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 533 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ralph L. Cowen

Mailing Address 517 E 3rd St

City State Zip Code  
Crowley LA 70526-5221

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farming

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1025.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0130006

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Geraldine E. Sheppard

Mailing Address 5470 Coach Lite Trl

City State Zip Code  
Loves Park IL 61111-3516

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 589.50

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0130007

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joanne Kim Phan

Mailing Address 3773 University Dr Apt 207

City State Zip Code  
Irvine CA 92612-4668

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0130008

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 534 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. James Fisher

Mailing Address 2195 E Pine River Rd

City State Zip Code  
Midland MI 48640-8662

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
601.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060517.0130010

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William D. George, II

Mailing Address 4257 Cobbler Rd

City State Zip Code  
Schnecksville PA 18078-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer Ironton Telephone Co. Occupation  
President/C.E.O./Gen'l Mgr.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060517.0140002

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Donna D. Ring

Mailing Address 74894 Lennon Pl Ste F1

City State Zip Code  
Palm Desert CA 92260-1982

FEC ID number of contributing federal political committee. **C**

Name of Employer Creative Concepts Occupation  
Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060517.0150002

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 535 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bennie E. Hewett

Mailing Address PO Box 907670

City State Zip Code  
Gainesville GA 30501-0945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hewett Mgmt. Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0150003

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Khan Mohiuddin

Mailing Address 19 Crocker Ave

City State Zip Code  
Lunenburg MA 01462-2513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Business

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0150004

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Charlotte Darnell

Mailing Address 1601 Todds Ln

City State Zip Code  
Hampton VA 23666-3120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0150005

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 536 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Sherry Gavrilenkowsky</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 13273 Greensboro Rd PO Box 337		<b>Transaction ID: FF060517.0150008</b>	
City Greensboro State MD Zip Code 21639-0337	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Nicolas G. Chammas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1871 Cover Dr		<b>Transaction ID: FF060517.0150009</b>	
City Youngstown State OH Zip Code 44514-1612	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Aca Engineering Occupation Civil Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Nasim Joel</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1460 Carr St		<b>Transaction ID: FF060517.0150010</b>	
City Lakewood State CO Zip Code 80214-6102	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Retail			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 537 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ronald Richards

Mailing Address 579 Wesley Rd

City State Zip Code  
Creve Coeur IL 61610-3865

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0150011

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ivan Atanassov

Mailing Address 523 Stockholm Ct

City State Zip Code  
Hemet CA 92545-2378

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0150015

Amount of Each Receipt this Period  
750.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Anna L. Miller

Mailing Address 415 Main St

City State Zip Code  
Greenup KY 41144-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer Harold D Miller Insurance Agency Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0160009

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 538 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Julia Cashion

Mailing Address 1604 Old Donation Pkwy

City State Zip Code  
Virginia Beach VA 23454-3063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sentara Nursing Center/Windamere Administrator

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060517.0160013

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James K. Hill

Mailing Address 64 Oak Birch Dr

City State Zip Code  
Williams Bay WI 53191-9792

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060517.0210023

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Wayne Bounds

Mailing Address 4752 Shands Dr

City State Zip Code  
Mesquite TX 75150-1137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 221.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** FF060517.0220034

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 539 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Mary G. Kelly</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 526 Rawleigh Dr		<b>Transaction ID: FF060517.0230006</b>	
City State Zip Code Corpus Christi TX 78412-3168	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Nicholas J. Bovras</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 112 Beekman Rd		<b>Transaction ID: FF060517.0230007</b>	
City State Zip Code Summit NJ 07901-1723	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Rev. Ronald C. Lawson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 243 Neponset Ave		<b>Transaction ID: FF060517.0260013</b>	
City State Zip Code Dorchester MA 02122-3239	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 540 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Alan Reid Mailing Address PO Box 568 City State Zip Code Gates Mills OH 44040-0568 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> FF060517.0260043 Amount of Each Receipt this Period 500.00
Name of Employer Occupation INFO REQUESTED INFO REQUESTED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Joseph J. Lenoach Mailing Address 6201 Joliet Rd City State Zip Code Burr Ridge IL 60527-0823 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> FF060517.0260044 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Wtr. Ent. Inc. Hospitality Developer/ Operato Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. J. Claude Brannan Mailing Address RR 1 Box 238 City State Zip Code Marietta OK 73448-9731 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> FF060517.0300012 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Self Employed Rancher Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 550.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 541 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. J. Claude Brannan

Mailing Address RR 1 Box 238

City State Zip Code  
Marietta OK 73448-9731

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0300013

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Harrison W. Moore, Jr.

Mailing Address 101 Boulder Trl

City State Zip Code  
Bronxville NY 10708-5905

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0340003

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jerry S. Drabicki

Mailing Address 593 N Seward Ave

City State Zip Code  
Auburn NY 13021-2105

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0360007

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 542 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Mary E. Cullerton</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 10 Paradise Cv		<b>Transaction ID: FF060517.0360010</b>	
City Laguna Niguel	State CA	Zip Code 92677-4254	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Humphrey B. Simson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 6201 SE Winged Foot Dr		<b>Transaction ID: FF060517.0360017</b>	
City Stuart	State FL	Zip Code 34997-8655	Amount of Each Receipt this Period 151.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard C. Witte</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 596 Abilene Trl		<b>Transaction ID: FF060517.0370001</b>	
City Cincinnati	State OH	Zip Code 45215-2555	Amount of Each Receipt this Period 225.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1076.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	427.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 543 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert L. Cass		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1598 Golfside Village Blvd		<b>Transaction ID:</b> FF060517.0370003	
City State Zip Code Apopka FL 32712-2162	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Joseph A. Cavegn		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 14 John St		<b>Transaction ID:</b> FF060517.0390004	
City State Zip Code Stony Point NY 10980-1912	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Ruth C. Peters		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1326 W Greasewood St		<b>Transaction ID:</b> FF060517.0400001	
City State Zip Code Apache Jct AZ 85220-4023	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	495.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 544 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. James E. Russell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2113 Hunters Wood Ln		<b>Transaction ID: FF060517.0420010</b>	
City Lexington State KY Zip Code 40502-3066	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. William F. Edmonds</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2600 Arlington Ave S Apt 60		<b>Transaction ID: FF060517.0420011</b>	
City Birmingham State AL Zip Code 35205-4160	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Jack Leftwich</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 12970 Rd 3 NE		<b>Transaction ID: FF060517.0420017</b>	
City Moses Lake State WA Zip Code 98837-4902	Amount of Each Receipt this Period 525.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Manufacture Rough Iron Casting	Aggregate Year-to-Date ▼ 525.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	875.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 545 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John C. Spencer

Mailing Address PO Box 1529

City Sn Bernrdo State CA Zip Code 92402-1529

FEC ID number of contributing federal political committee. **C**

Name of Employer Metro/ Star Auto Parts Occupation President/c.e.o

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0420020

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Eddie R. Fischer

Mailing Address 2020 E Orangethorpe Ave

City Fullerton State CA Zip Code 92831-5327

FEC ID number of contributing federal political committee. **C**

Name of Employer Visita Paint Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0420023

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John G. Lagestee, Sr.

Mailing Address 330 W Taft Dr

City South Holland State IL Zip Code 60473-2026

FEC ID number of contributing federal political committee. **C**

Name of Employer Walts Food Center Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0440003

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 546 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert P. Layman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 876 Plantation Blvd		<b>Transaction ID:</b> FF060517.0440016	
City State Zip Code Gallatin TN 37066-4496	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John F. Eldridge		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 418 Rogers Ave		<b>Transaction ID:</b> FF060517.0440018	
City State Zip Code Sumter SC 29150-8869	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Daniel J. Hartung		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 918 Deming Way Ste 200		<b>Transaction ID:</b> FF060517.0440021	
City State Zip Code Madison WI 53717-1993	Amount of Each Receipt this Period 600.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hartung Brothers	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 547 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Harlan N. Douglas

Mailing Address 221 Lamp Lighter Ln

City State Zip Code  
Ponte Vedra FL 32082-1934

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0440027

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sue C. Edwards

Mailing Address PO Box 145

City State Zip Code  
Manhattan Beach CA 90267-0145

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0440029

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Neal F. Krouse

Mailing Address 458 W Hillsboro Blvd

City State Zip Code  
Deerfield Beach FL 33441-1604

FEC ID number of contributing federal political committee. **C**

Name of Employer Quick Quality Care Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: FF060517.0440032

Amount of Each Receipt this Period  
800.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 548 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gordon W. Miller

Mailing Address 3750 Wimbleton Dr

City Birmingham State AL Zip Code 35223-2730

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Salesman

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060517.0440049

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Helen J. Bradley

Mailing Address PO Box 122

City Ctr Tuftnboro State NH Zip Code 03816-0122

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060517.0440052

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
Wan Y. Ryu

Mailing Address 101 Route 130 S

City Cinnaminson State NJ Zip Code 08077-2845

FEC ID number of contributing federal political committee. **C**

Name of Employer Semo Toys Inc. Occupation Importer

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060517.0440057

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 549 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Clinton E. Gamble

Mailing Address 1031 Piermont Way

City State Zip Code  
**Galt CA 95632-3444**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ca Motor Car Dealers Serv- Director Of Benefit Serv-  
ices

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ **400.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 15 / 2006**

**Transaction ID: FF060517.0440068**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
Ms. Gertrude R. Lacey

Mailing Address 12650 Dayton River Rd

City State Zip Code  
**Dayton MN 55327-9639**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ **240.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 15 / 2006**

**Transaction ID: FF060517.0440074**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
Ms. Bonnie Lucia Nelson

Mailing Address 6501 Buckley Dr

City State Zip Code  
**Cambria CA 93428-2005**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nbo Teacher

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ **250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 15 / 2006**

**Transaction ID: FF060517.0440077**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 550 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Verda L. Deveny		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 9445 Grand Mesa Dr		<b>Transaction ID:</b> FF060517.0440098	
City State Zip Code Las Vegas NV 89134-8933	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Albert N. Watson		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 2504 Betty Hill Rd		<b>Transaction ID:</b> FF060517.0440101	
City State Zip Code Adger AL 35006-1802	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Barry D. Martinette		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 2723 Airline Blvd		<b>Transaction ID:</b> FF060517.0440117	
City State Zip Code Portsmouth VA 23701-2702	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Tidewater Sealants Corp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	476.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 551 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Carl K. McKenney		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 2306 Ridge Rd		<b>Transaction ID:</b> FF060517.0440121	
City State Zip Code Rockwall TX 75087-5140	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mckenney Clinic	Occupation Physician/owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Angus T. Morrison		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 560 Indian Mound St Apt 1C		<b>Transaction ID:</b> FF060517.0440122	
City State Zip Code Wayzata MN 55391-1729	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Theresa J. Polhemus		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 12 Manitou Station Rd		<b>Transaction ID:</b> FF060517.0480001	
City State Zip Code Garrison NY 10524-3009	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 552 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey Newburg

Mailing Address 5251 E Arroyo Rd

City State Zip Code  
Paradise Valley AZ 85253-3321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** FF060517.0510038

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Cecily Taylor

Mailing Address 39206 Guardino Dr  
Apt 210

City State Zip Code  
Fremont CA 94538-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060517.0520001

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peter T. Simonson

Mailing Address 1318 Birchmont Beach Rd NE

City State Zip Code  
Bemidji MN 56601-8564

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retail Lumber President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060517.0520030

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>785.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 553 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Francis D. Collins

Mailing Address 17020 Park Ave

City State Zip Code  
Sonoma CA 95476-3445

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Developer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060517.0520090

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Miss Mary C. Schwinn

Mailing Address W4446 Basswood Dr

City State Zip Code  
Lake Geneva WI 53147-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060517.0540002

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Vickie L. Rubenstein

Mailing Address 3099 Bienville Blvd

City State Zip Code  
Ocean Springs MS 39564-4308

FEC ID number of contributing federal political committee. **C**

Name of Employer Louis A. Rubenstein, Md Occupation Medical

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060517.0540003

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 554 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold E. Randolph

Mailing Address 451 Mill St

City State Zip Code  
Centreville AL 35042-2341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Randolph & Randolph Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2006

Transaction ID: FF060517.0540006

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel B. Nail

Mailing Address 1140 Lighthouse Blvd

City State Zip Code  
Charleston SC 29412-8924

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2006

Transaction ID: FF060517.0570008

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ronald J. Defelice

Mailing Address 39 Blue Heron

City State Zip Code  
Irvine CA 92603-0306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jackson, Demarco & Peckenpaugh Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
490.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2006

Transaction ID: FF060517.0570016

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>670.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 555 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Helen Neuendorfer

Mailing Address 1400 Waverly Rd  
Apt A110

City Gladwyne State PA Zip Code 19035-1255

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0580029

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John S. Weber

Mailing Address 1565 Mapleton Dr

City Centerville State OH Zip Code 45459-5010

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0590023

Amount of Each Receipt this Period  
155.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles E. Bomar

Mailing Address 2761 Old Buck Creek Rd

City Adolphus State KY Zip Code 42120-9785

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0590028

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 505.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 556 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Aaron Whitley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 11555 E Nc Highway 97 PO Box 1817		<b>Transaction ID:</b> FF060517.0600001	
City Rocky Mount      State NC      Zip Code 27803-5869	Amount of Each Receipt this Period 160.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED      Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 361.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Helen M. Best		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address W220N8124 Town Line Rd		<b>Transaction ID:</b> FF060517.0600007	
City Menomonee Fls      State WI      Zip Code 53051-3432	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired      Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Gail C. Campbell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 20611 Parkfield Ave		<b>Transaction ID:</b> FF060517.0600015	
City Jordan      State MN      Zip Code 55352-9428	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired      Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	785.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 557 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Donald C. Cottrell, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 996		Transaction ID: FF060517.0600029	
City Ponte Vedra	State FL	Amount of Each Receipt this Period 400.00	
Zip Code 32004-0996			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Howard H. Hankins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 772 El Mirador Dr		Transaction ID: FF060517.0600042	
City Fullerton	State CA	Amount of Each Receipt this Period 500.00	
Zip Code 92835-1821			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David Cuckler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 64547		Transaction ID: FF060517.0600066	
City Port Ludlow	State WA	Amount of Each Receipt this Period 100.00	
Zip Code 98365			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 558 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Harold B. Phelps, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 663 Majestic Dr		Transaction ID: FF060517.0600075	
City State Zip Code Santa Maria CA 93455-2300	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

B. Full Name (Last, First, Middle Initial) Mr. Jeff H. Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 8700 Post Oak Ln Apt 241		Transaction ID: FF060517.0600082	
City State Zip Code San Antonio TX 78217-5168	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Mr. Ike Duren		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 9595		Transaction ID: FF060517.0610002	
City State Zip Code Panama City FL 32417-9595	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Blue Water Realty Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 559 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Robert M. Munson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 7224 25th St W		<b>Transaction ID:</b> FF060517.0610007	
City State Zip Code Tacoma WA 98466-4708	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. E. May Hammond		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 3121 NE 43rd St		<b>Transaction ID:</b> FF060517.0610010	
City State Zip Code Ft Lauderdale FL 33308-5807	Amount of Each Receipt this Period 450.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Joan K. Nebel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 660 Lambert Ave		<b>Transaction ID:</b> FF060517.0610024	
City State Zip Code Flagler Beach FL 32136-3213	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	975.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 560 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Oliver D. Hamlin

Mailing Address PO Box 667

City State Zip Code  
Lafayette CA 94549-0667

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0610030

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ralph E. Peterson

Mailing Address 156 Estabrook St  
Apt 306

City State Zip Code  
San Leandro CA 94577-5940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 361.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0610040

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Joan F. Chubb

Mailing Address 35600 Monte Verde Rd

City State Zip Code  
Temecula CA 92592-7832

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0610050

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	375.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 561 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Jensen

Mailing Address 8 S Clary Rd

City State Zip Code  
Jefferson ME 04348-4094

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060517.0610056

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David H. Burrows

Mailing Address 2301 Stanley Ave SE

City State Zip Code  
Roanoke VA 24014-2409

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060517.0610064

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Fred T. Clifton

Mailing Address 23100 Via Esplendor

City State Zip Code  
Cupertino CA 95014-6509

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060517.0610074

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 562 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Nina Yancey		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 504 Amanda Furnace Dr		<b>Transaction ID:</b> FF060517.0620015	
City Ashland	State KY	Zip Code 41101-2193	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation Homemaker	Aggregate Year-to-Date ▼ 1000.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Janice Drake		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address RR 1 Box 206		<b>Transaction ID:</b> FF060517.0620040	
City Nowata	State OK	Zip Code 74048-9729	Amount of Each Receipt this Period 105.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 205.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Carol Y. Doane		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 403 Valley View Dr		<b>Transaction ID:</b> FF060517.0620062	
City Cashmere	State WA	Zip Code 98815-1258	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 326.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	705.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 563 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Miriam H. Herr		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 300		<b>Transaction ID:</b> FF060517.0620070	
City Nottingham	State PA	Zip Code 19362-0300	Amount of Each Receipt this Period 1250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Herr Foods Inc.	Occupation Secretary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Louis J. Nagy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1655 McGill Ave		<b>Transaction ID:</b> FF060517.0620073	
City Mobile	State AL	Zip Code 36604-1218	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Lloyd P. Shepherd		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 58484 Buffalo Mine Rd		<b>Transaction ID:</b> FF060517.0620074	
City Senecaville	State OH	Zip Code 43780-9711	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2403.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 564 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Maxine Palmer

Mailing Address 19855 SW Touchmark Way  
Unit 104

City State Zip Code  
Bend OR 97702-1953

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0630026

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Joan M. Halbruegger

Mailing Address 5845 Nottingham Ave  
Apt 4

City State Zip Code  
Saint Louis MO 63109-2736

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0630028

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard W. Budd

Mailing Address PO Box 2961

City State Zip Code  
Minden NV 89423-2961

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0630056

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	230.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 565 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Barbara J. Glerum		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 5112 Piccadilly Cir		<b>Transaction ID:</b> FF060517.0640022	
City State Zip Code Westminster CA 92683-4837	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. James M. Stewart		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 195 Edgewater Dr		<b>Transaction ID:</b> FF060517.0640025	
City State Zip Code Rio Vista CA 94571-2009	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. J. Ferris		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 4798		<b>Transaction ID:</b> FF060517.0640063	
City State Zip Code Ithaca NY 14852-4798	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wood Office	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 566 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Doyce H. Harned</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 9 Amherst Ln		<b>Transaction ID: FF060517.0640064</b>	
City State Zip Code Wappingers Falls NY 12590-3923	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. William E. Guy</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID: FF060517.0650004</b>	
City State Zip Code Pasadena CA 91106-3252	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. William H. Spurlyn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 455 Florin Rd		<b>Transaction ID: FF060517.0650012</b>	
City State Zip Code Sacramento CA 95831-2024	Amount of Each Receipt this Period 265.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 956.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	395.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 567 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Cornelius Penner

Mailing Address PO Box 96

City Dinuba State CA Zip Code 93618-0096

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	6

**Transaction ID:** FF060517.0650014

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles F. Stack

Mailing Address PO Box 718

City Sublimity State OR Zip Code 97385-0718

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	6

**Transaction ID:** FF060517.0650022

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert P. Beckham, Jr.

Mailing Address 919 Aleeda Ln

City Santa Barbara State CA Zip Code 93108-1900

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	6

**Transaction ID:** FF060517.0650028

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 568 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. D. R. Moore, Jr.

Mailing Address PO Box 188

City State Zip Code  
Byhalia MS 38611-0188

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0660001

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. T. S. Hayes

Mailing Address 5010 Old Highway 49 S

City State Zip Code  
Clarksdale MS 38614-8717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0660017

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Sarah D. Davis

Mailing Address PO Box 1375

City State Zip Code  
Point Clear AL 36564-1375

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0660018

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 569 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Harold A. Loyacano, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 64609 Highway 41		<b>Transaction ID:</b> FF060517.0660060	
City Pearl River	State LA	Zip Code 70452-3611	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Enviromental Enterprises USA	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Shizuko Austin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 469		<b>Transaction ID:</b> FF060517.0670001	
City Nisswa	State MN	Zip Code 56468-0469	Amount of Each Receipt this Period 26.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 642.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James J. Shea, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 70168 Sonora Rd		<b>Transaction ID:</b> FF060517.0670009	
City Rancho Mirage	State CA	Zip Code 92270-3431	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	526.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 570 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Albert Frank Fisher

Mailing Address 3768 Steck Ave

City Austin State TX Zip Code 78759-8759

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060517.0670012

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Sylvia A. Hansted

Mailing Address 11953 Collins St

City Valley Village State CA Zip Code 91607-1803

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 402.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060517.0670013

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William E. Guy

Mailing Address 990 E Del Mar Blvd # 203

City Pasadena State CA Zip Code 91106-3252

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2157.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060517.0670014

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	230.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 571 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Arlo W. Turner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 4814 S 7th St		Transaction ID: FF060517.0670021	
City Milwaukee	State WI	Zip Code 53221-2445	Amount of Each Receipt this Period 56.25
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 599.75	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. J. R. Lewis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1314 Saint Joseph St		Transaction ID: FF060517.0670023	
City Carolina Bch	State NC	Zip Code 28428-4709	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 601.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Lloyd P. Shepherd		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 58484 Buffalo Mine Rd		Transaction ID: FF060517.0670037	
City Senecaville	State OH	Zip Code 43780-9711	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	456.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 572 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Lloyd P. Shepherd</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 58484 Buffalo Mine Rd		<b>Transaction ID: FF060517.0670038</b>	
City State Zip Code Senecaville OH 43780-9711	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2403.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. M. Russell Odell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 7131 Lago St		<b>Transaction ID: FF060517.0670042</b>	
City State Zip Code Sarasota FL 34241-5814	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Walrus Instrudries	Occupation General Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Howard L. Hatfield</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 327 S Summit Ave		<b>Transaction ID: FF060517.0670043</b>	
City State Zip Code Bremerton WA 98312-4223	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	410.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 573 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Virginia B. McCall

Mailing Address 2142 Morning Park Dr

City State Zip Code  
Katy TX 77494-2147

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2006

Transaction ID: FF060517.0670044

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Theresa L. Pham

Mailing Address 16612 Bartlett Ln Apt 4

City State Zip Code  
Huntington Beach CA 92647-8542

FEC ID number of contributing federal political committee. **C**

Name of Employer Social Service Agency Occupation Office Technician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2006

Transaction ID: FF060517.0670051

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Clearey

Mailing Address 625 Crestview Dr

City State Zip Code  
Glendora CA 91741-2945

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 752.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2006

Transaction ID: FF060517.0670056

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>330.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 574 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David H. Burrows		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 2301 Stanley Ave SE		<b>Transaction ID:</b> FF060517.0670057	
City State Zip Code Roanoke VA 24014-2409	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Melvin A. Moe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1102 S 114th St Lot 61		<b>Transaction ID:</b> FF060517.0670059	
City State Zip Code Mesa AZ 85208-7933	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 381.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. James Chen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1188 Bishop St Ste 3103		<b>Transaction ID:</b> FF060517.0690003	
City State Zip Code Honolulu HI 96813-3312	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hawaii Mortgage Central	Occupation Mortgage Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	815.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 575 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Douglas E. Morris</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address <b>6881 S 500 E</b>		<b>Transaction ID: FF060517.0690016</b>	
City <b>Midvale</b>	State <b>UT</b>	Zip Code <b>84047-1345</b>	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Smith's Food &amp; Drug</b>	Occupation <b>Pharmacist</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Chong H. Kim</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address <b>15107 S Atlantic Ave</b>		<b>Transaction ID: FF060517.0690022</b>	
City <b>Compton</b>	State <b>CA</b>	Zip Code <b>90221-3683</b>	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ralph . Muhlestein</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address <b>8228 Pinositas Rd</b>		<b>Transaction ID: FF060517.0690023</b>	
City <b>Whittier</b>	State <b>CA</b>	Zip Code <b>90605-1330</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 576 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Donald P. Ebright

Mailing Address 5056 Festival Blvd Apt A  
Apt A

City Bellingham State WA Zip Code 98226-7610

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0690025

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Louis J. Boschulte

Mailing Address PO Box 464

City Charlotte AMA State VI Zip Code 00804-0464

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0690026

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frank Brogni

Mailing Address 6629 W Via Del Sol Dr

City Glendale State AZ Zip Code 85310-5706

FEC ID number of contributing federal political committee. **C**

Name of Employer Career Images Inc Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060517.0690035

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 175.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 577 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Thomas B. Larson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 275 Larkspur Ln		<b>Transaction ID:</b> FF060518.0080003	
City State Zip Code Mesquite NV 89027-6250	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Andrew M. Sutton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 314		<b>Transaction ID:</b> FF060518.0080011	
City State Zip Code Mount Prospect IL 60056-0314	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 426.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Frank J. Johnson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3455 E Jasmine Cir		<b>Transaction ID:</b> FF060518.0100003	
City State Zip Code Mesa AZ 85213-3247	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	502.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 578 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Martha R. Huer</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 447 Dudley Dr		<b>Transaction ID: FF060518.0100027</b>	
City State Zip Code Shreveport LA 71104-5021	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Harlan W. Seeley</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 6509 Meadow Hills St NE		<b>Transaction ID: FF060518.0110009</b>	
City State Zip Code Albuquerque NM 87111-6544	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 601.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Frederic D. Selbie, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 635 S Park Centre Ave Apt 1118		<b>Transaction ID: FF060518.0110013</b>	
City State Zip Code Green Valley AZ 85614-6273	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 579 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joel S. Mutnick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3404 Bimini Ave		<b>Transaction ID:</b> FF060518.0140004	
City State Zip Code Hollywood FL 33026-4639	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Senior Citizen Mutual Inc.	Occupation C O O		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. H. Guy Hardy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 12700 Lake Ave Apt 613		<b>Transaction ID:</b> FF060518.0230003	
City State Zip Code Lakewood OH 44107-1547	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5001.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Franz J. Thiel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1207 Seaway Dr		<b>Transaction ID:</b> FF060518.0250013	
City State Zip Code Fort Pierce FL 34949-3147	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 402.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	521.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 580 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Betsy B. Edwards</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 4215 Harding Pike Apt. 1110		<b>Transaction ID: FF060518.0250015</b>	
City Nashville	State TN	Zip Code 37205-2033	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Payton Scott</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 11517 Highway 183		<b>Transaction ID: FF060518.0250017</b>	
City Rising Star	State TX	Zip Code 76471-3036	Amount of Each Receipt this Period 90.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Anna M. Howard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 6430 Millikin Rd		<b>Transaction ID: FF060518.0260005</b>	
City Liberty Township	State OH	Zip Code 45044-9217	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	92.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 581 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Hazel Howard Le Valley

Mailing Address 35 Overland Route St

City Ardmore State OK Zip Code 73401-2915

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060518.0280047

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William J. McMahon, Jr.

Mailing Address 130 W Atlantic Blvd

City Ocean City State NJ Zip Code 08226-4604

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060518.0290030

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jay S. Froshaug

Mailing Address 1425 Venice St

City Longmont State CO Zip Code 80501-2521

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Concrete Work

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060518.0290032

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 582 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Everett B. Tufts, Jr.

Mailing Address PO Box 265

City State Zip Code  
West Bridgewater MA 02379-0265

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060518.0310010

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Miss Rebecca M. Scowden

Mailing Address 1508 Doran Dr

City State Zip Code  
Odessa TX 79761-1523

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060518.0320067

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Al. E. Kretschmer

Mailing Address 1028 Antilles Ave

City State Zip Code  
Fort Pierce FL 34982-3525

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060518.0320073

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>330.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 583 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Mrs. Kathy Kleindienst

Mailing Address 651 E Paseo El Mirador

City State Zip Code  
 Palm Springs CA 92262-4844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 The Escrow Connection Escrow Officer

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060518.0340001

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Robert Carlile

Mailing Address 1502 Tulane Ct

City State Zip Code  
 Liberal KS 67901-5408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 J & R Sand Co. Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060518.0360001

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
 Mr. Joseph E. Jones

Mailing Address 1120 Devonshire Way

City State Zip Code  
 Palm Bch Gdns FL 33418-6863

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060518.0370002

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 584 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Alice N. Harnett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 402 W Carolina Ave		<b>Transaction ID:</b> FF060518.0380031	
City State Zip Code Summerville SC 29483-4361	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 446.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Leonard C. Warager, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 975 Jansen Ave		<b>Transaction ID:</b> FF060518.0380035	
City State Zip Code San Jose CA 95125-2441	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert C. McLeod		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1717 Tonya Trl		<b>Transaction ID:</b> FF060518.0380063	
City State Zip Code Neenah WI 54956-1623	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	145.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 585 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Tauba Sass Mailing Address 80 Bear Creek Ln City Asheville State NC Zip Code 28806-6801 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> FF060518.0380068 Amount of Each Receipt this Period 25.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 402.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Robert C. Styer Mailing Address 10118 Telegraph Rd City Glen Allen State VA Zip Code 23059-4560 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> FF060518.0380071 Amount of Each Receipt this Period 250.00
Name of Employer Atlantic Resource Group Occupation Business Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Christopher Mattson Mailing Address 126 E King St City Lancaster State PA Zip Code 17602-2832 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> FF060518.0390049 Amount of Each Receipt this Period 50.00
Name of Employer Barley Snyder, LLC Occupation 7172995201 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>325.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 586 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Antoinette Mitchell

Mailing Address PO Box 360

City Ojai State CA Zip Code 93024-0360

FEC ID number of contributing federal political committee. **C**

Name of Employer Jmar Homes Inc. Occupation Exec Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 16 / 2006

Transaction ID: FF060518.0420007

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Andrew Picone

Mailing Address 24 5th Ave

City New York State NY Zip Code 10011-8858

FEC ID number of contributing federal political committee. **C**

Name of Employer Andrew Picone DDS Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 16 / 2006

Transaction ID: FF060518.0420011

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David Holbrook

Mailing Address PO Box 171318

City Salt Lake City State UT Zip Code 84117-1318

FEC ID number of contributing federal political committee. **C**

Name of Employer Simcoe Holbrook & Associates Occupation Salesman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 16 / 2006

Transaction ID: FF060518.0420014

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 587 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Chanaka Delanerolle</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 940 Pavilion St		<b>Transaction ID: FF060518.0420018</b>	
City State Zip Code Cincinnati OH 45202-1732	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Restaurant Operations Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Barry Pratt</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 303 Olde Town Way		<b>Transaction ID: FF060518.0420021</b>	
City State Zip Code McDonough GA 30252-8627	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Cherokee Brick & Tile Co.	Occupation Sales Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Claude C. Blakemore</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1822 Altamira PI		<b>Transaction ID: FF060518.0430001</b>	
City State Zip Code San Diego CA 92103-1202	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 588 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Rulon T. Stephenson

Mailing Address 102 Karen St

City State Zip Code  
Leesville LA 71446-3724

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 591.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** FF060518.0430002

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Edna A. Flanagan

Mailing Address PO Box 418

City State Zip Code  
Chocorua NH 03817-0418

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** FF060518.0430004

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Col. Burton P. Jones

Mailing Address 2500 Dockside Ct

City State Zip Code  
Plano TX 75093-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** FF060518.0440005

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>401.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 589 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Cora P. Elsner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1850 Alice St Apt 1205		<b>Transaction ID:</b> FF060518.0440006	
City Oakland	State CA	Zip Code 94612-4131	Amount of Each Receipt this Period 26.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 376.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John Israel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 2025 Elm Ct		<b>Transaction ID:</b> FF060518.0440016	
City Ontario	State CA	Zip Code 91761-7619	Amount of Each Receipt this Period 201.00
FEC ID number of contributing federal political committee. C			
Name of Employer Bg Israel Construction		Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Louis J. Boschulte		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 464		<b>Transaction ID:</b> FF060518.0440023	
City Charlotte AMA	State VI	Zip Code 00804-0464	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 401.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	278.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 590 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Dorothy M. Anderson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 24 New St		<b>Transaction ID:</b> FF060518.0440076	
City Charleston	State SC	Amount of Each Receipt this Period 51.00	
Zip Code 29401-2478		Amount of Each Receipt this Period 51.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 51.00	
Name of Employer Occupation Homemaker		Amount of Each Receipt this Period 51.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. W. Gignilliat</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1111 Hillcrest Dr		<b>Transaction ID:</b> FF060518.0440078	
City Longview	State TX	Amount of Each Receipt this Period 201.00	
Zip Code 75601-4650		Amount of Each Receipt this Period 201.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 201.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 201.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Rita W. Fahrenkrug</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 8365 Indian Hill Rd		<b>Transaction ID:</b> FF060518.0440083	
City Manlius	State NY	Amount of Each Receipt this Period 1000.00	
Zip Code 13104-8791		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation INFO REQUESTED		Amount of Each Receipt this Period 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1252.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1252.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 591 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John H. Fitz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 6 Lisa Ln		Transaction ID: FF060518.0450005	
City Willington	State CT	Zip Code 06279-2242	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Raytheon Company	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ronald D. Grant		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 861 Woodside Trails Dr		Transaction ID: FF060518.0450008	
City Ballwin	State MO	Zip Code 63021-6193	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1051.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Gladys L. White		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1309 Phillips Springs Rd		Transaction ID: FF060518.0450010	
City Gladewater	State TX	Zip Code 75647-9242	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Care Inn Nursing Home	Occupation Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 592 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Robert F. Agostinelli</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 45 Rockefeller Plz Fl 27		<b>Transaction ID: FF060518.0450056</b>	
City State Zip Code New York NY 10111-0100	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rhone Group, L.I.c.	Occupation Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. John B. Hackler</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 2521 Minnesota Ave		<b>Transaction ID: FF060518.0470013</b>	
City State Zip Code Winter Park FL 32789-5333	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Stuplo, Inc.	Occupation Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Nancy Jean Parr</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1415 Sugar Creek Blvd		<b>Transaction ID: FF060518.0530001</b>	
City State Zip Code Sugar Land TX 77478-3929	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	751.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 593 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Capt. Lawrence Lovig, Jr.  
Mailing Address 1251 San Antonio Creek Rd  
City Santa Barbara State CA Zip Code 93111-1313  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 505.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6  
Transaction ID: FF060518.0550004  
Amount of Each Receipt this Period  
305.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. A. Cushman May  
Mailing Address 15 E 91st St  
City New York State NY Zip Code 10128-0648  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6  
Transaction ID: FF060518.0550017  
Amount of Each Receipt this Period  
375.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. William J. Kottemann  
Mailing Address 835 Partenwood Rd  
City Orono State MN Zip Code 55356-9730  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Kottemann Orthodontics Occupation Doctor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6  
Transaction ID: FF060518.0550030  
Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>780.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 594 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Ione E. Half		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 107 Ranch Rd 620 S Ste 102		Transaction ID: FF060518.0560005	
City State Zip Code Lakeway TX 78734-3999	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Half Interests	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kenneth R. Duff		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 267 W Edgewater Ter		Transaction ID: FF060518.0560006	
City State Zip Code New Braunfels TX 78130-4933	Amount of Each Receipt this Period 225.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. A. Bernard Ackerman, MD		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 2 E 70th St Fl 10		Transaction ID: FF060518.0570005	
City State Zip Code New York NY 10021-4913	Amount of Each Receipt this Period 251.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ackerman Academy Dermatop- athology	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 431.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	676.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 595 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William F. Urban, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 29110 Hansville Rd NE		<b>Transaction ID:</b> FF060518.0570013
City State Zip Code Kingston WA 98346-7629	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Stuart C. Nickerson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 1032 Fearington Post		<b>Transaction ID:</b> FF060518.0580026
City State Zip Code Pittsboro NC 27312-5502	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William F. O'Keeffe, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 820 Laguna Honda Blvd		<b>Transaction ID:</b> FF060518.0600008
City State Zip Code San Francisco CA 94127-1024	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Saffirst	Occupation Businessman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 596 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Raymond A. Jean

Mailing Address 5014 Cedar Creek Dr

City State Zip Code  
Houston TX 77056-2402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Quanet Corp. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** FF060518.0600040

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Billy J. Knott

Mailing Address 2911 Daniel Ave

City State Zip Code  
Dallas TX 75205-1515

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** FF060518.0610027

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kent P. Martinez

Mailing Address 151 Choctaw Rd

City State Zip Code  
Thibodaux LA 70301-7228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GBM Enterprisés, Inc. Owner/ Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

**Transaction ID:** FF060518.0620019

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 597 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edwin A. Ricks

Mailing Address 6490 S McCarran Blvd  
Ste 4

City State Zip Code  
Reno NV 89509-6119

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ricks And Associates Real Estate Developer

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

**Transaction ID:** FF060518.0620035

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Lionel L. Gorbaty

Mailing Address 14200 Nadine St

City State Zip Code  
Oak Park MI 48237-6929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Doctor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

**Transaction ID:** FF060518.0620048

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ruth M. Bates

Mailing Address 54 Senior Dr

City State Zip Code  
Monroe CT 06468-2734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

**Transaction ID:** FF060518.0630007

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 598 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Nancy W. Haselhorst		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 6225 Mineral Point Rd		<b>Transaction ID:</b> FF060518.0630017	
City State Zip Code Madison WI 53705-4562	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 801.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Wayne V. Ecklund		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 3232 N Daniels Ct		<b>Transaction ID:</b> FF060518.0630026	
City State Zip Code Arlington Hts IL 60004-1510	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Henry A. Dorn		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 49159		<b>Transaction ID:</b> FF060518.0630052	
City State Zip Code Greenwood SC 29649-0003	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Green & Company	Occupation C P A & Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	475.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 599 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Rita C. Dobbins

Mailing Address 10126 Meridian Lakes Dr

City State Zip Code  
Houston TX 77095-6640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Unemployed Houswife

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 215.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 17 / 2006

**Transaction ID:** FF060518.0630073

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John McDonnell

Mailing Address 41900 Horizon View Ave

City State Zip Code  
Cloverdale OR 97112-9716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 17 / 2006

**Transaction ID:** FF060518.0640001

Amount of Each Receipt this Period  
750.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James V. Greenlee

Mailing Address 8 Greenlee Ln  
Unit 33

City State Zip Code  
Cameron MT 59720-9637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 17 / 2006

**Transaction ID:** FF060518.0640017

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>875.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 600 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Frederick B. Smith, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 4712 SW 6th Ave Apt 210		<b>Transaction ID:</b> FF060518.0660002	
City State Zip Code Topeka KS 66606-2272	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Barbara N. Foster		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 7015 Red Bug Lake Rd Apt 234		<b>Transaction ID:</b> FF060518.0700005	
City State Zip Code Oviedo FL 32765-5058	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Stephen I. Chazen		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address PO Box 427		<b>Transaction ID:</b> FF060518.0710015	
City State Zip Code Pacific Plsds CA 90272-0427	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occidental Petroleum Corp.	Occupation Corporate Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1110.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 601 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. D. Throop Vaughan</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 5300 W 96th St Hoosier Village		<b>Transaction ID: FF060518.0710026</b>	
City Indianapolis      State IN      Zip Code 46268-3999	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Donal E. Keith</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 526 Glenwood St		<b>Transaction ID: FF060518.0710033</b>	
City Bossier City      State LA      Zip Code 71111-2205	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Beasley-Keith Insurance Agency Inc	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas H. McAboy</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 121 Laurel Oak Ln		<b>Transaction ID: FF060518.0710042</b>	
City Vero Beach      State FL      Zip Code 32963-3836	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 602 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John J. Hudiburg		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2006	
Mailing Address 197 Commodore Dr		<b>Transaction ID:</b> FF060518.0720008	
City State Zip Code Jupiter FL 33477-4111	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Irvin J. Larson		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2006	
Mailing Address 11462 Pala Mesa Dr		<b>Transaction ID:</b> FF060518.0720029	
City State Zip Code Northridge CA 91326-1839	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 976.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Calvin A. Knoke		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2006	
Mailing Address 24 Riverside Dr		<b>Transaction ID:</b> FF060518.0720045	
City State Zip Code Oak Ridge TN 37830-9012	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 603 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Lisbeth A. Fogg		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 5505 River Rd		<b>Transaction ID:</b> FF060518.0720051	
City State Zip Code Camilla GA 31730-5813	Amount of Each Receipt this Period 630.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Billie Alderman		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 503 S Main St		<b>Transaction ID:</b> FF060518.0720063	
City State Zip Code Winters TX 79567-5823	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Robert E. Fisch		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 5455 Sheridan Rd		<b>Transaction ID:</b> FF060518.0720065	
City State Zip Code Kenosha WI 53140-3734	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Optometrist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1380.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 604 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Maurice Brubaker

Mailing Address PO Box 412000

City State Zip Code  
Saint Louis MO 63141-2000

FEC ID number of contributing federal political committee. **C**

Name of Employer B.a.i. Occupation  
Energy Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

**Transaction ID:** FF060518.0720068

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lennart H. Carlson

Mailing Address 706 Bobwhite Ln

City State Zip Code  
Naples FL 34108-3430

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
426.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

**Transaction ID:** FF060518.0730002

Amount of Each Receipt this Period  
65.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Lidia Trapuzzano

Mailing Address 8911 Midnight Pass Rd  
Apt 216

City State Zip Code  
Sarasota FL 34242-2977

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

**Transaction ID:** FF060518.0730005

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>585.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 605 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Alger

Mailing Address 7452 Foxfire Dr

City State Zip Code  
Crystal Lake IL 60012-1608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 221.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2006

**Transaction ID:** FF060518.0740006

Amount of Each Receipt this Period  
26.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David . Pries

Mailing Address 10575 Ivanrest Ave SW

City State Zip Code  
Byron Center MI 49315-8572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2006

**Transaction ID:** FF060518.0740012

Amount of Each Receipt this Period  
201.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James Frank Tacker, Jr.

Mailing Address 4405 Glendale Sq

City State Zip Code  
Nashville TN 37204-4114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 276.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2006

**Transaction ID:** FF060518.0740016

Amount of Each Receipt this Period  
51.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	278.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 606 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. R. Thomas Hunt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 402 W Ojai Ave Ste 101		<b>Transaction ID:</b> FF060518.0740023
City Ojai State CA Zip Code 93023-2406	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Billie W. Tom		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 30 Plymouth St		<b>Transaction ID:</b> FF060519.0010001
City Centereach State NY Zip Code 11720-4212	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 391.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Eddie Beltran		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 13090 Park St		<b>Transaction ID:</b> FF060519.0040007
City Santa Fe Spgs State CA Zip Code 90670-4032	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Metal Finishing Occupation Owner	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 607 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Mrs. Virginia J. Rhine

Mailing Address 1124 112th St E

City Tacoma State WA Zip Code 98445-3710

FEC ID number of contributing federal political committee. **C**

Name of Employer R W Rhine, Inc. Occupation Office Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060519.0040009

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Yar Meshkaty

Mailing Address 301 N Canon Dr Ste E

City Beverly Hills State CA Zip Code 90210-4716

FEC ID number of contributing federal political committee. **C**

Name of Employer YAR Meshkaty Properties Inc. Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060519.0110001

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
 Mr. Howard J. Awand

Mailing Address 806 W Market St

City Vevay State IN Zip Code 47043-1059

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Medical Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

**Transaction ID:** FF060519.0120001

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 608 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph L. Wright

Mailing Address 218 Vanity Park Dr

City State Zip Code  
Jackson AL 36545-3216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jackson Academy Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060519.0180008

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John H. Tran

Mailing Address 3131 Camino Del Rio N Ste 1500

City State Zip Code  
San Diego CA 92108-5716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Us Financial Management Ceo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060519.0180014

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles S. Dougherty

Mailing Address 2340 Cove Rd

City State Zip Code  
Ellensburg WA 98926-7903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060519.0190004

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 609 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles S. Dougherty

Mailing Address 2340 Cove Rd

City State Zip Code  
Ellensburg WA 98926-7903

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060519.0190005

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Eugene R. Lopez

Mailing Address 9108 Colonial Rd Apt C2

City State Zip Code  
Brooklyn NY 11209-6129

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060519.0190006

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. David C. Olive

Mailing Address 3040 Hamilton Rd

City State Zip Code  
Auburn AL 36830-7556

FEC ID number of contributing federal political committee. **C**

Name of Employer David Olive Odpc Occupation Optician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: FF060519.0190007

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	675.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 610 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John R. Brougher, Jr.

Mailing Address 3017 Southwestern Blvd

City State Zip Code  
Dallas TX 75225-7841

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2006

Transaction ID: FF060519.0190024

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. H. R. Ainsworth

Mailing Address 3008 Fox Hill Dr

City State Zip Code  
Rocklin CA 95765-5087

FEC ID number of contributing federal political committee. **C**

Name of Employer Omni-means, Ltd Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2006

Transaction ID: FF060519.0190026

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Hon. William S. Conover

Mailing Address 405 Kingsberry Cir

City State Zip Code  
Pittsburgh PA 15234-1065

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2006

Transaction ID: FF060519.0190036

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 611 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Donald T. Martin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 7508 Community Dr		<b>Transaction ID:</b> FF060519.0190042
City State Zip Code Citrus Heights CA 95610-4402	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John D. McSpadden, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 30172 Spray Dr		<b>Transaction ID:</b> FF060519.0210001
City State Zip Code Canyon Lake CA 92587-7436	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Guy J. Ladouceur		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 4550 Deer Forest Ave		<b>Transaction ID:</b> FF060519.0210005
City State Zip Code Las Vegas NV 89139-7641	Amount of Each Receipt this Period 16.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Star Vacation Resorts Occupation Executive Director of Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	196.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 612 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Edward J. O'Hare		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 22500 Orchard Lake Rd		<b>Transaction ID:</b> FF060519.0220003	
City State Zip Code Farmington MI 48336-3242	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Courtland Associates Inc.	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Billie W. Tom		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 30 Plymouth St		<b>Transaction ID:</b> FF060519.0220004	
City State Zip Code Centereach NY 11720-4212	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ronald A. Caselli		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 742 Bicknell Rd		<b>Transaction ID:</b> FF060519.0220007	
City State Zip Code Los Gatos CA 95030-2148	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Grabb-Ellis	Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2260.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 613 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Billie W. Tom

Mailing Address 30 Plymouth St

City State Zip Code  
Centereach NY 11720-4212

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 391.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060519.0230005

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Gladys L. White

Mailing Address 1309 Phillips Springs Rd

City State Zip Code  
Gladewater TX 75647-9242

FEC ID number of contributing federal political committee. **C**

Name of Employer Care Inn Nursing Home Occupation Nurse

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060519.0240001

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John H. Fittz

Mailing Address 6 Lisa Ln

City State Zip Code  
Willington CT 06279-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer Raytheon Company Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060519.0250005

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	170.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 614 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Ronald D. Grant</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 861 Woodside Trails Dr		<b>Transaction ID: FF060519.0250008</b>	
City State Zip Code Ballwin MO 63021-6193	Amount of Each Receipt this Period 450.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1051.00		

Full Name (Last, First, Middle Initial) <b>B. Billie W. Tom</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 30 Plymouth St		<b>Transaction ID: FF060519.0250010</b>	
City State Zip Code Centereach NY 11720-4212	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Reuben M. Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 13104 197th Ave SE		<b>Transaction ID: FF060519.0280008</b>	
City State Zip Code Monroe WA 98272-8338	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Real Estate Associates NW. Inc.	Occupation Real Estate Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	720.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 615 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul J. Casale

Mailing Address 18032 NE 109th Ct

City State Zip Code  
Redmond WA 98052-7222

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Marriage and Family Therapist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060519.0300004

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Anthony J. Warren

Mailing Address 1900 S 18th Ave

City State Zip Code  
West Bend WI 53095-8796

FEC ID number of contributing federal political committee. **C**

Name of Employer West Bend Mutual Insurance Co. Occupation  
CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
321.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060519.0340002

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles S. Dougherty

Mailing Address 2340 Cove Rd

City State Zip Code  
Ellensburg WA 98926-7903

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: FF060519.0350001

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **271.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 616 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Billie W. Tom		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 30 Plymouth St		<b>Transaction ID:</b> FF060519.0360010
City State Zip Code Centereach NY 11720-4212	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Robert C. Foersterling		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 2 Normton Dr		<b>Transaction ID:</b> FF060519.0410021
City State Zip Code Saint Louis MO 63124-2053	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Barbara N. Foster		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 7015 Red Bug Lake Rd Apt 234		<b>Transaction ID:</b> FF060519.0420044
City State Zip Code Oviedo FL 32765-5058	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	76.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 617 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Claud B. Walker		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 1		<b>Transaction ID:</b> FF060519.0440023	
City Taylor	State LA	Zip Code 71080-0001	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Fibrebond Corporation	Occupation Executive/Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael D. Luther		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 7702		<b>Transaction ID:</b> FF060519.0490005	
City Warner Robins	State GA	Zip Code 31095-7702	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Disabled		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 596.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Elmer Lammon		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 121 Downing St		<b>Transaction ID:</b> FF060519.0490017	
City Panama City Beach	State FL	Zip Code 32413-3619	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	785.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 618 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jimmy D. Moore		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 245 Jacintoport Blvd		<b>Transaction ID:</b> FF060519.0490027	
City State Zip Code Saraland AL 36571-3306	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer S And M Transportation Inc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Linda J. Jaffrey		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 1101 Rain Tree Rd		<b>Transaction ID:</b> FF060519.0510001	
City State Zip Code Knoxville TN 37923-1982	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Oral & Maxillo Surgical Specialist	Occupation Technician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. C. D. Gale		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 791		<b>Transaction ID:</b> FF060519.0530003	
City State Zip Code Hattiesburg MS 39403-0791	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 619 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Istvan Potorke

Mailing Address 925 E Merritt Ave

City Tulare State CA Zip Code 93274-2221

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2006

**Transaction ID:** FF060519.0550001

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Chris J. Beckman

Mailing Address 410 Riverview Dr

City Auburn State CA Zip Code 95603-5734

FEC ID number of contributing federal political committee. **C**

Name of Employer County Of Placer Occupation Appraiser

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2006

**Transaction ID:** FF060519.0590009

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Patricia B. Rupprecht

Mailing Address 33 Crow Ridge Rd

City Voorheesville State NY Zip Code 12186-5000

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2006

**Transaction ID:** FF060519.0590012

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 620 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Donald E. Crown		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address PO Box 1785		<b>Transaction ID:</b> FF060519.0590021	
City Sanford	State ME	Zip Code 04073-7785	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Harlan W. Seeley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 6509 Meadow Hills St NE		<b>Transaction ID:</b> FF060519.0590057	
City Albuquerque	State NM	Zip Code 87111-6544	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Hashim J. Hassan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 1801 W Main St Ste 1		<b>Transaction ID:</b> FF060519.0590078	
City Dothan	State AL	Zip Code 36301-1360	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Oral Surgeon		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 621 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Andrew J. Kicinski

Mailing Address 424 Ironwood Dr

City State Zip Code  
Canonsburg PA 15317-9569

FEC ID number of contributing federal political committee. **C**

Name of Employer Chemco Equipment Co Occupation Environmental Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0590086

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Claye Meier

Mailing Address 8850 Ferguson Rd Apt 2043

City State Zip Code  
Dallas TX 75228-8343

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0590104

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ralph . Muhlestein

Mailing Address 8228 Pinositas Rd

City State Zip Code  
Whittier CA 90605-1330

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0600001

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 385.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 622 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. William B. Holloman Mailing Address 1520 Todds Ln City Hampton State VA Zip Code 23666-2947 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> FF060519.0610002 Amount of Each Receipt this Period 300.00
Name of Employer Self Occupation Educator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Thomas I. Hamilton Mailing Address 2875 Fleetwood Dr City San Bruno State CA Zip Code 94066-2628 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> FF060519.0610006 Amount of Each Receipt this Period 200.00
Name of Employer Murray & Assoc Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 801.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Marc A. Colon Mailing Address 10033 Somerset Ln City Shreveport State LA Zip Code 71106-8537 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> FF060519.0650003 Amount of Each Receipt this Period 250.00
Name of Employer La State Univ Hlth Scienc- es Ce Occupation Doctor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 623 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. D. Wayne Gittinger		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1420 5th Ave Ste 4100		<b>Transaction ID:</b> FF060519.0680019
City State Zip Code Seattle WA 98101-2375	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Lane Powell P C	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Margaret M. Turnquist		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 5394 N Via Sempreverde		<b>Transaction ID:</b> FF060519.0680025
City State Zip Code Tucson AZ 85750-5971	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sharon R. Miller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 3421 Cliffside Dr		<b>Transaction ID:</b> FF060519.0680047
City State Zip Code La Crosse WI 54601-7804	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 624 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Milton M. Harris

Mailing Address PO Box 312

City State Zip Code  
Ruth NV 89319-0312

FEC ID number of contributing federal political committee. **C**

Name of Employer Round Mountain Cold Occupation Truck Driver

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
341.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: FF060519.0680058

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Edwin L. Knau

Mailing Address 836 Leroy Ln

City State Zip Code  
River Falls WI 54022-1291

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
281.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: FF060519.0690015

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Harold C. Blakewell

Mailing Address 4009 Hildring Dr W

City State Zip Code  
Fort Worth TX 76109-4719

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: FF060519.0710008

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	270.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 625 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Vincent R. Hohman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address <b>9718 Karmont Ave</b>		<b>Transaction ID: FF060519.0710020</b>	
City <b>South Gate</b>	State <b>CA</b>	Zip Code <b>90280-5411</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. James W. Galle</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address <b>4400 W 115th St Apt 243</b>		<b>Transaction ID: FF060519.0710058</b>	
City <b>Leawood</b>	State <b>KS</b>	Zip Code <b>66211-2712</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 541.00		

Full Name (Last, First, Middle Initial) <b>C. Lt. Col. Lawrence C. Tarbell, Ret.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address <b>7020 Treehaven Rd</b>		<b>Transaction ID: FF060519.0710084</b>	
City <b>Fort Worth</b>	State <b>TX</b>	Zip Code <b>76116-9034</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 626 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Shirley E. Hall</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 170 Norwood Dr		<b>Transaction ID: FF060519.0720005</b>	
City State Zip Code Council Blfs IA 51503-8400	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Esther Demster</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 305 Bauer Ln		<b>Transaction ID: FF060519.0730002</b>	
City State Zip Code Maryville IL 62062-5739	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas Malcom Walker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 3400 Salado Creek Dr Apt 403		<b>Transaction ID: FF060519.0730038</b>	
City State Zip Code San Antonio TX 78217-3356	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	330.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 627 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Marlene Schube</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address <b>7341 Waterpoint Ln</b>		<b>Transaction ID: FF060519.0740011</b>	
City <b>Cincinnati</b>	State <b>OH</b>	Amount of Each Receipt this Period 300.00	
Zip Code <b>45255-3925</b>		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer <b>INFO REQUESTED</b>		Occupation <b>INFO REQUESTED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert N. Jorgensen</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address <b>35 Webhannet Harbour Rd</b>		<b>Transaction ID: FF060519.0740061</b>	
City <b>Wells</b>	State <b>ME</b>	Amount of Each Receipt this Period 50.00	
Zip Code <b>04090-4636</b>		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer <b>Self</b>		Occupation <b>Antique Dealer</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Bruce E. Roddick</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address <b>38680 Calle De La Siesta</b>		<b>Transaction ID: FF060519.0790016</b>	
City <b>Murrieta</b>	State <b>CA</b>	Amount of Each Receipt this Period 40.00	
Zip Code <b>92563-5758</b>		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer <b>Retired</b>		Occupation <b>Retired</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	390.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 628 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edwin L. Knauf

Mailing Address 836 Leroy Ln

City State Zip Code  
River Falls WI 54022-1291

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0790034

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John W. Talley

Mailing Address 6523 Mechanicsville Tpke

City State Zip Code  
Mechanicsville VA 23111-3696

FEC ID number of contributing federal political committee. **C**

Name of Employer John Talley Motors, Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0790054

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Alice M. Kett

Mailing Address 110 Carlton Rd

City State Zip Code  
Watsonville CA 95076-9405

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0790063

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	920.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 629 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Jackie Dean</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2006
Mailing Address 5372 Riverview Dr		<b>Transaction ID:</b> FF060519.0790076
City State Zip Code Saint Augustine FL 32080-7235	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Audrey F. Grove</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2006
Mailing Address 8508 W Clarke St		<b>Transaction ID:</b> FF060519.0790091
City State Zip Code Wauwatosa WI 53226-1928	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer Occupation Busch Precisions Secretary	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Launce E. Sout</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2006
Mailing Address 765 Treasure Lk		<b>Transaction ID:</b> FF060519.0800013
City State Zip Code Du Bois PA 15801-9015	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer Occupation Sout Wholesale Company President	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 630 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Meelis Kail</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2006
Mailing Address 2415 Northwood Ave		<b>Transaction ID:</b> FF060519.0800034
City Easton State PA Zip Code 18045-2112	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 55.00
Name of Employer American 1st Choice Cleaners Occupation Cleaner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 362.00

Full Name (Last, First, Middle Initial) <b>B. Mr. Dave Sweet</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2006
Mailing Address 1329 Minnis Cir		<b>Transaction ID:</b> FF060519.0800048
City Milpitas State CA Zip Code 95035-3158	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 150.00
Name of Employer Sweets Gymnastics Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00

Full Name (Last, First, Middle Initial) <b>C. Mr. Gordon H. Smith</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2006
Mailing Address 956 Rancho Cir		<b>Transaction ID:</b> FF060519.0800068
City Fullerton State CA Zip Code 92835-3337	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer High Tower Software Inc. Occupation CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>705.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 631 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. John S. Bunton</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address <b>780 Mountain Rd</b>		<b>Transaction ID: FF060519.0810017</b>	
City <b>Parsonsfield</b>	State <b>ME</b>	Zip Code <b>04047-6821</b>	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Eugene G. Ditullio</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address <b>917 Winding Ridge Dr Apt 5</b>		<b>Transaction ID: FF060519.0810026</b>	
City <b>Richmond</b>	State <b>IN</b>	Zip Code <b>47374-8020</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Mary O. Stanley</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address <b>280 W Cherry Cir</b>		<b>Transaction ID: FF060519.0810032</b>	
City <b>Memphis</b>	State <b>TN</b>	Zip Code <b>38117-3002</b>	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1675.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 632 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Harrison C. Noyes, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 4 Weston Rd Unit 3312		<b>Transaction ID:</b> FF060519.0810034	
City Groton State CT Zip Code 06340-8952	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 791.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Mary O. Willis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 7501 E Thompson Peak Pkwy Unit 410		<b>Transaction ID:</b> FF060519.0810047	
City Scottsdale State AZ Zip Code 85255-4537	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. C. W. Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 103 NE 6th St		<b>Transaction ID:</b> FF060519.0810053	
City Galva State IL Zip Code 61434-1137	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	655.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 633 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Philip O. Geier, Jr.

Mailing Address 6000 Redbird Hollow Ln

City State Zip Code  
Cincinnati OH 45243-3331

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** FF060519.0810098

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Edward A. Lohnes

Mailing Address 2155 Parkway Blvd

City State Zip Code  
Alliance OH 44601-4642

FEC ID number of contributing federal political committee. **C**

Name of Employer Edward A Lohnes DMD Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** FF060519.0810100

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Po Wen Chang

Mailing Address 19362 Fortune Pl

City State Zip Code  
Rowland Heights CA 91748-2360

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investment

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** FF060519.0820008

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 634 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Dr. Clyde V. Von Der Ahe, M. D.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 226 S Rimpau Blvd		<b>Transaction ID: FF060519.0820015</b>	
City State Zip Code Los Angeles CA 90004-3733	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 611.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Thomas R. Van Meter</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 1234 W Palm Ave		<b>Transaction ID: FF060519.0820019</b>	
City State Zip Code Redlands CA 92373-5753	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael Barr</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 1100 Union St		<b>Transaction ID: FF060519.0820023</b>	
City State Zip Code San Francisco CA 94109-2019	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 635 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Edwin L. Cooper		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 7700 Seawall Blvd Apt 203		<b>Transaction ID:</b> FF060519.0820035
City State Zip Code Galveston TX 77551-3401	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John Elliott		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 10400 Downey Ave Apt 102		<b>Transaction ID:</b> FF060519.0820056
City State Zip Code Downey CA 90241-2524	Amount of Each Receipt this Period 70.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 386.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Spencer Grant Miller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address PO Box 714		<b>Transaction ID:</b> FF060519.0820057
City State Zip Code Weaverville CA 96093-0714	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1270.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 636 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Steve T. Gillen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 5306 29th St NE		<b>Transaction ID:</b> FF060519.0820059
City State Zip Code Tacoma WA 98422-3202	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pacific Marine Assoc.	Occupation Long Shoreman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Tien Cu		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 14612 Park Ln Apt B		<b>Transaction ID:</b> FF060519.0830014
City State Zip Code Midway City CA 92655-1163	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Tracy E. Grady		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 110 Burry Ave		<b>Transaction ID:</b> FF060519.0830019
City State Zip Code Bradfordwoods PA 15015-1238	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 637 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Myrtle Elvera Cosme-Fagan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address <b>PO Box 10765 # 6</b>		<b>Transaction ID: FF060519.0840018</b>	
City <b>Bakersfield</b>	State <b>CA</b>	Zip Code <b>93389-0765</b>	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00		

Full Name (Last, First, Middle Initial) <b>B. Meelis Kail</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address <b>2415 Northwood Ave</b>		<b>Transaction ID: FF060519.0860002</b>	
City <b>Easton</b>	State <b>PA</b>	Zip Code <b>18045-2112</b>	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer American 1st Choice Cleaners	Occupation Cleaner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 362.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Susan F. Crary</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address <b>1015 Fox Hill Rd</b>		<b>Transaction ID: FF060519.0860013</b>	
City <b>State College</b>	State <b>PA</b>	Zip Code <b>16803-1822</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>86.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 638 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph N. Chairge

Mailing Address 203 Clark Rd

City State Zip Code  
Duryea PA 18642-1112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Avoca Mach. Co. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2136.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0860014

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard A. Carroll

Mailing Address 2239 Hyde Park Rd

City State Zip Code  
Jacksonville FL 32210-3819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 221.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0860046

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William A. Burgett

Mailing Address 1575 Belvidere St  
Apt 111

City State Zip Code  
El Paso TX 79912-2635

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 276.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0860049

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 639 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Mary C. Wheeler

Mailing Address 4490 Mesa Dr  
# 119 W

City State Zip Code  
Oceanside CA 92056-2646

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

Transaction ID: FF060519.0860053

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Stanley Maskiewicz

Mailing Address 1238 Gooseberry Ct

City State Zip Code  
Sunnyvale CA 94087-2018

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

Transaction ID: FF060519.0860059

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Harold R. Marcus

Mailing Address 323 Ladue Lake Dr

City State Zip Code  
Saint Louis MO 63141-7413

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

Transaction ID: FF060519.0860060

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	105.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 640 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Wayne Bounds

Mailing Address 4752 Shands Dr

City State Zip Code  
Mesquite TX 75150-1137

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0870018

Amount of Each Receipt this Period  
21.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jim Lancia

Mailing Address 9430 Lima Rd

City State Zip Code  
Fort Wayne IN 46818-8934

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation General Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0870019

Amount of Each Receipt this Period  
501.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ronald F. Silver

Mailing Address 28702 Taos Ct

City State Zip Code  
Cathedral City CA 92234-3575

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0870028

Amount of Each Receipt this Period  
26.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	548.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 641 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edwin L. Knauf

Mailing Address 836 Leroy Ln

City State Zip Code  
River Falls WI 54022-1291

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0870034

Amount of Each Receipt this Period  
21.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Leonard M. Kirk

Mailing Address 6 Hunter Dr

City State Zip Code  
Bel Air MD 21014-3934

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0870036

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Israel Egenburg, Sr.

Mailing Address 272 Exeter St

City State Zip Code  
Brooklyn NY 11235-3726

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0870041

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	223.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 642 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Vern Tolsma

Mailing Address 45 Church St

City Groton State CT Zip Code 06340

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

**Transaction ID:** FF060519.0870044

Amount of Each Receipt this Period  
76.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas J. Donovan

Mailing Address PO Box 61567

City Vancouver State WA Zip Code 98666-1567

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Portland Occupation Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

**Transaction ID:** FF060519.0870057

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert F. Agostinelli

Mailing Address 45 Rockefeller Plz  
FI 27

City New York State NY Zip Code 10111-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer Rhone Group, L.I.c. Occupation Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

**Transaction ID:** FF060519.0880007

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>726.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 643 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Martin G. Louthan		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address PO Box 98		<b>Transaction ID:</b> FF060519.0880015
City State Zip Code Konawa OK 74849-0098	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Kathleen S. Frazier		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1231 Hillandale Ave Unit 10		<b>Transaction ID:</b> FF060519.0880036
City State Zip Code La Habra CA 90631-5283	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Allied Appliance Service Corp	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Bernard T. Dague		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2041 W Vista Way		<b>Transaction ID:</b> FF060519.0890014
City State Zip Code Vista CA 92083-6013	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 644 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert A. Brand

Mailing Address 411 Arbor Way

City State Zip Code  
State College PA 16803-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1075.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0900006

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Dolores C. Ghyselinc

Mailing Address 40530 Highway 41

City State Zip Code  
Oakhurst CA 93644-9621

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0900032

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Howard E. Ellis

Mailing Address 1808 E Warren Ave

City State Zip Code  
Victoria TX 77901-4229

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060519.0910006

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	225.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 645 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joseph G. Knudson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 3255 Cheyenne Blvd		<b>Transaction ID:</b> FF060519.0920013
City State Zip Code Sioux City IA 51104-1835	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. I. R. Andersen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1800 Kings Canyon Rd		<b>Transaction ID:</b> FF060519.0940002
City State Zip Code Carson City NV 89703-5300	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Rancher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Larry L. Cunningham		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4832 Pleasant Grove Rd		<b>Transaction ID:</b> FF060519.0950006
City State Zip Code Lexington KY 40515-1243	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer University of Kentucky Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 646 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert S. Chappellear		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 9085 Los Lagos Cir S		<b>Transaction ID:</b> FF060522.0250001	
City State Zip Code Granite Bay CA 95746-5855	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Robert S. Chappellear		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 9085 Los Lagos Cir S		<b>Transaction ID:</b> FF060522.0270005	
City State Zip Code Granite Bay CA 95746-5855	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Mary C. Wheeler		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 4490 Mesa Dr # 119 W		<b>Transaction ID:</b> FF060522.0330004	
City State Zip Code Oceanside CA 92056-2646	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 236.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	226.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 647 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Tien Cu		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006
Mailing Address 14612 Park Ln Apt B		Transaction ID: FF060522.0340003
City Midway City	State CA	Zip Code 92655-1163
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) B. Ms. Nancy E. Lyons		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006
Mailing Address 580 Piedmont St		Transaction ID: FF060522.0380002
City Wilmington	State OH	Zip Code 45177-2521
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1501.00	

Full Name (Last, First, Middle Initial) C. Dr. Wayne Payne		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006
Mailing Address 610 W 17th St		Transaction ID: FF060522.0380006
City Pueblo	State CO	Zip Code 81003-2141
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Oral-maxillofacial Surgeon	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	401.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 648 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard Gorman		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 950 Country Club Dr # 113		<b>Transaction ID:</b> FF060522.0390007	
City Moraga	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94556-1922			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Harrison W. Moore, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 101 Boulder Trl		<b>Transaction ID:</b> FF060522.0390015	
City Bronxville	State NY	Amount of Each Receipt this Period 25.00	
Zip Code 10708-5905			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Maxine Wood		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 311 E Market St		<b>Transaction ID:</b> FF060522.0390022	
City Panora	State IA	Amount of Each Receipt this Period 75.00	
Zip Code 50216-1065			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 649 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Marcos De Zarraga</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 416 Amalfi Ave		<b>Transaction ID:</b> FF060522.0420001	
City State Zip Code Coral Gables FL 33146-2205	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Florida Crystal Corp.	Occupation Employee Relations Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Bill Morgan</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 5001 Holzman Ave		<b>Transaction ID:</b> FF060522.0500001	
City State Zip Code Choctaw OK 73020-5540	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation VP/Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. George Hugo Hentschel, III</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address PO Box 618		<b>Transaction ID:</b> FF060522.0540003	
City State Zip Code Newfield NJ 08344-0618	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bally's	Occupation Security		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 650 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Sunil F. Antani		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 4305 Pyles Ford Rd		<b>Transaction ID:</b> FF060522.0550013	
City Wilmington	State DE	Zip Code 19807-1735	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mbna	Occupation Vice Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Jean A. Shafer		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 274 County Line Rd		<b>Transaction ID:</b> FF060522.0560005	
City Huntingdon Vy	State PA	Zip Code 19006-2407	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C			
Name of Employer Contract Pharmacy Service	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert J. Glaser		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 400 Raymondale Dr Apt 19		<b>Transaction ID:</b> FF060522.0560046	
City S Pasadena	State CA	Zip Code 91030-2143	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer N A S A	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 651 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Bernell M. Oberbeck

Mailing Address 5502 Carmelynn St

City Torrance State CA Zip Code 90503-1210

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: FF060522.0560050

Amount of Each Receipt this Period  
125.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph G. Voss

Mailing Address PO Box 655

City Olive Branch State MS Zip Code 38654-0655

FEC ID number of contributing federal political committee. **C**

Name of Employer Federal Express Occupation Pilot

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: FF060522.0560055

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Dee Ledbetter

Mailing Address 1607 Fairview Ave

City Monroe State LA Zip Code 71201-3315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: FF060522.0560060

Amount of Each Receipt this Period  
35.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	185.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 652 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Nancy L. Strongo		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 6761 E Leafwood Dr		<b>Transaction ID:</b> FF060522.0560061	
City State Zip Code Anaheim CA 92807-5027	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Pamela J. Alexender		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 4986 Zeiglers Church Rd		<b>Transaction ID:</b> FF060522.0560062	
City State Zip Code Spring Grove PA 17362-7580	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harry T. Tully, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 4480 Brittany Dr		<b>Transaction ID:</b> FF060522.0560063	
City State Zip Code Redding CA 96002-5106	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 653 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James E. Buchart

Mailing Address 520 Fairfield Dr  
Ste 710

City State Zip Code  
Louisville KY 40206-2932

FEC ID number of contributing federal political committee. **C**

Name of Employer Hilliard Lyons Occupation Financial Counselor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0560098

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeff Krenz

Mailing Address 47257 US Highway 160

City State Zip Code  
Bayfield CO 81122-9618

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Builder

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0560113

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth L. Cowan

Mailing Address 2133 Fantero Ave

City State Zip Code  
Escondido CA 92029-4221

FEC ID number of contributing federal political committee. **C**

Name of Employer Scheidel Occupation Construction Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0580035

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 654 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Paul Terrell		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 124 Emma St		<b>Transaction ID:</b> FF060522.0590046	
City State Zip Code New Iberia LA 70560-6026	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Weiser Security Services	Occupation Security Guard		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Anne H. Bratcher		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 4942 Normandy Ln		<b>Transaction ID:</b> FF060522.0590073	
City State Zip Code Memphis TN 38117-2702	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joseph Caiafa		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 14351 Rose Ave		<b>Transaction ID:</b> FF060522.0610011	
City State Zip Code Flushing NY 11355-2326	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	260.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 655 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David Port		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 311 W Main St		<b>Transaction ID:</b> FF060522.0620041	
City State Zip Code Carmi IL 62821-1486	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Minister	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Verna L. Miell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 13022 SE 234th St		<b>Transaction ID:</b> FF060522.0620052	
City State Zip Code Kent WA 98031-3627	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 351.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Theodore R. Beatty		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 31568 Anna Ln		<b>Transaction ID:</b> FF060522.0630026	
City State Zip Code Bay Village OH 44140-1002	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 252.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 656 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Curtis Ritchie</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 9504 Ravenswood Rd		<b>Transaction ID: FF060522.0630059</b>	
City State Zip Code Granbury TX 76049-4524	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Richard E. Gulbranson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 114 Encino Ave		<b>Transaction ID: FF060522.0640022</b>	
City State Zip Code Camarillo CA 93010-1721	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Property Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas A. Bondehagen</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 310 Santa Rita Pl		<b>Transaction ID: FF060522.0640052</b>	
City State Zip Code Banning CA 92220-1942	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	220.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 657 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Philip D. Jorgensen		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 128 Parsons Rd		<b>Transaction ID:</b> FF060522.0650067	
City State Zip Code Longwood FL 32779-2747	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Contractor	Aggregate Year-to-Date ▼ 901.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William H. Myers		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 55 Ash Ct		<b>Transaction ID:</b> FF060522.0660034	
City State Zip Code Lake Jackson TX 77566-5827	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Louise Walter		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 8562 Highway B		<b>Transaction ID:</b> FF060522.0660088	
City State Zip Code Higbee MO 65257-2828	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Husband Occupation Secretary	Aggregate Year-to-Date ▼ 201.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 658 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Bradford J. Dye, III Mailing Address 8 Dell Dr City Oxford State MS Zip Code 38655-4324 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> FF060522.0670026 Amount of Each Receipt this Period 250.00
Name of Employer Self Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Payton Scott Mailing Address 11517 Highway 183 City Rising Star State TX Zip Code 76471-3036 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> FF060522.0680079 Amount of Each Receipt this Period 100.00
Name of Employer Self Occupation Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 241.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. E. Harold Saer, Jr. Mailing Address 42 Pinecrest Dr City Covington State LA Zip Code 70433-4413 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> FF060522.0680082 Amount of Each Receipt this Period 210.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>560.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 659 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Karen Hummel Lawton</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address <b>5442 S Holland St</b>		<b>Transaction ID: FF060522.0710052</b>	
City <b>Littleton</b>	State <b>CO</b>	Zip Code <b>80123-7434</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. James P. Jamison</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address <b>7092 Killdeer Dr</b>		<b>Transaction ID: FF060522.0720065</b>	
City <b>Canfield</b>	State <b>OH</b>	Zip Code <b>44406-9181</b>	Amount of Each Receipt this Period 105.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Youngstown Orthopaedic Associates	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Claudia C. Shanks</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address <b>4215 Harding Pike Apt 310</b>		<b>Transaction ID: FF060522.0730009</b>	
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37205-2026</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 771.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>705.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 660 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Margaret D. McCann</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address <b>5877 Cedar Oak Cv</b>		<b>Transaction ID: FF060522.0730010</b>	
City <b>Memphis</b>	State <b>TN</b>	Zip Code <b>38134-5526</b>	Amount of Each Receipt this Period 65.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 256.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Henry H. Mauz, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address <b>1608 Viscaino Rd</b>		<b>Transaction ID: FF060522.0730017</b>	
City <b>Pebble Beach</b>	State <b>CA</b>	Zip Code <b>93953-3303</b>	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 787.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Eugene L. Berlew</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address <b>9935 3rd Ave</b>		<b>Transaction ID: FF060522.0730023</b>	
City <b>Brooklyn</b>	State <b>NY</b>	Zip Code <b>11209-8241</b>	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 351.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>241.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 661 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Dorothy D. Morello

Mailing Address 1096 Highlands Cir

City Alford State FL Zip Code 32420-8052

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** FF060522.0730026

Amount of Each Receipt this Period  
 10.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles R. Cassise

Mailing Address 139 Shadecrest Dr

City Mauldin State SC Zip Code 29662-2028

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** FF060522.0730036

Amount of Each Receipt this Period  
 25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Nizam A. Fayad

Mailing Address 6030 Knotty Post Ln

City Spring State TX Zip Code 77373-7016

FEC ID number of contributing federal political committee. **C**

Name of Employer Franklin Corporate Transportation Co. Occupation Limo-driver

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 353.50

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** FF060522.0730040

Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>95.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 662 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert B. Rankin		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 2 Sycamore St		<b>Transaction ID:</b> FF060522.0730043	
City Beardstown	State IL	Amount of Each Receipt this Period 11.00	
Zip Code 62618-8016			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Mady Denove		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 13145 Hesby St		<b>Transaction ID:</b> FF060522.0740006	
City Sherman Oaks	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 91423-2109			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert H. Alcorn		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 200 Midland Dr		<b>Transaction ID:</b> FF060522.0740014	
City Pinehurst	State NC	Amount of Each Receipt this Period 100.00	
Zip Code 28374-8255			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	211.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 663 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Howard D. Passage		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 13010 McDuffee Run		<b>Transaction ID:</b> FF060522.0740054 Amount of Each Receipt this Period 100.00
City State Zip Code Carmel IN 46033-8818	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Larry L. Detweiler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 1060 E 86th St Ste 65K Ste 65K		<b>Transaction ID:</b> FF060522.0740055 Amount of Each Receipt this Period 100.00
City State Zip Code Indianapolis IN 46240-1831	FEC ID number of contributing federal political committee. C	
Name of Employer Centron Systems County	Occupation Owner	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Wade H. Carden		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 14050 Cutten Rd Apt. 122		<b>Transaction ID:</b> FF060522.0740060 Amount of Each Receipt this Period 300.00
City State Zip Code Houston TX 77069-2230	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 664 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Carl H. Rohman

Mailing Address 1312 Fall Creek Rd

City Lincoln State NE Zip Code 68510-4950

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

**Transaction ID:** FF060522.0740092

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles J. Turner, Jr.

Mailing Address 900 N Island Dr NW

City Atlanta State GA Zip Code 30327-4624

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

**Transaction ID:** FF060522.0750003

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Gerard

Mailing Address 2150 Route 38  
Apt 356

City Cherry Hill State NJ Zip Code 08002-4375

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

**Transaction ID:** FF060522.0750004

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **450.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 665 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Steven Koh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 3200 Wilshire Blvd Fl 7		<b>Transaction ID: FF060522.0750033</b>	
City Los Angeles	State CA	Zip Code 90010-1333	Amount of Each Receipt this Period 505.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Steel Corp.	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1005.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Jean C. Talmage</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 1138 Devonshire Way		<b>Transaction ID: FF060522.0750066</b>	
City Palm Beach Gardens	State FL	Zip Code 33418-6863	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Juan Espejo, Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 20 E Clarke Pl Apt 401		<b>Transaction ID: FF060522.0750073</b>	
City Bronx	State NY	Zip Code 10452-7531	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Andy Kim	Occupation Cook		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	755.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 666 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael S. Patterson		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address PO Box 2545		<b>Transaction ID:</b> FF060522.0760013	
City Morgan City	State LA	Amount of Each Receipt this Period 100.00	
Zip Code 70381-2545		FEC ID number of contributing federal political committee. C	
Name of Employer Central Boat Rentals Inc	Occupation G/b V.p. C B R		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Paul J. Sarvadi		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 21068 Baldwin Ln		<b>Transaction ID:</b> FF060522.0760018	
City Porter	State TX	Amount of Each Receipt this Period 2000.00	
Zip Code 77365-4196		FEC ID number of contributing federal political committee. C	
Name of Employer Administaff, Inc.	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Faye Hancock		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 3014 Fm 2609		<b>Transaction ID:</b> FF060522.0760023	
City Nacogdoches	State TX	Amount of Each Receipt this Period 300.00	
Zip Code 75965-4864		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1551.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 667 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. James M. Amrhein		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 1107 Blaine Top Pl		<b>Transaction ID:</b> FF060522.0760027	
City State Zip Code Tampa FL 33626	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lockheed Martin	Occupation Comm Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Thomas C. Urban		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 8951 Catalina Dr		<b>Transaction ID:</b> FF060522.0760031	
City State Zip Code Port Richey FL 34668-5710	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer H M Electronics	Occupation Programmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Zeb L. Burrell, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 103 Forest Ave		<b>Transaction ID:</b> FF060522.0760041	
City State Zip Code Elberton GA 30635-1809	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	305.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 668 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Rolliston W. Linscott, Jr.

Mailing Address 3710 Gulf Of Mexico Dr  
Lot 18

City State Zip Code  
Longboat Key FL 34228-2742

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: FF060522.0770007

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Stuart Bauer

Mailing Address 1855 Lynn Lea Rd

City State Zip Code  
Louisville KY 40216-2834

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Pool Builder

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: FF060522.0770031

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Cheryl Hunter

Mailing Address 1342 Grier Rd

City State Zip Code  
Wetumpka AL 36092-4151

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: FF060522.0770050

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 669 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Ella Zell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address <b>843 Mount Gretna Rd</b>		<b>Transaction ID: FF060522.0770054</b>	
City <b>Elizabethtown</b>	State <b>PA</b>	Zip Code <b>17022-1334</b>	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Madge T. Rowlett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address <b>4808 9th Ave W</b>		<b>Transaction ID: FF060522.0770070</b>	
City <b>Bradenton</b>	State <b>FL</b>	Zip Code <b>34209-3824</b>	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Jayne D. Tillman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address <b>PO Box 211</b>		<b>Transaction ID: FF060522.0770078</b>	
City <b>Utica</b>	State <b>MS</b>	Zip Code <b>39175-0211</b>	Amount of Each Receipt this Period 70.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 341.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	620.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 670 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Rosalie M. Cornell

Mailing Address 1010 Scott Park Dr  
Apt 302

City Iowa City State IA Zip Code 52245-3979

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0770089

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Theodore R. Lee, Jr.

Mailing Address 2726 S Beckley Ave

City Dallas State TX Zip Code 75224-2938

FEC ID number of contributing federal political committee. **C**

Name of Employer Dallion Past Occupation Publisher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0770092

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jay Eshleman

Mailing Address 8020 Roanoke St

City Philadelphia State PA Zip Code 19118-3948

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0770098

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 671 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Karl R. Olsen

Mailing Address 410 Jamesborough Dr

City State Zip Code  
Pittsburgh PA 15238-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer Retina Vitreous Consultants  
Occupation Doctor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
402.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** FF060522.0770102

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael Weigel

Mailing Address 7775 Cedarville Ct

City State Zip Code  
Cincinnati OH 45255-3046

FEC ID number of contributing federal political committee. **C**

Name of Employer Dawn Management  
Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** FF060522.0780012

Amount of Each Receipt this Period  
160.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ronnie Chai Chang

Mailing Address 2522 Monterey Ct

City State Zip Code  
Weston FL 33327-1504

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED  
Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** FF060522.0780021

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>460.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 672 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Barbara A. Ridenour

Mailing Address 3067 S Urbana Lisbon Rd

City State Zip Code  
S Charleston OH 45368-7776

FEC ID number of contributing federal political committee. **C**

Name of Employer Southeastern Schools Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0790021

Amount of Each Receipt this Period  
51.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bruce J. Poitrast

Mailing Address 110 S Pointe Ct

City State Zip Code  
Kingsport TN 37663-2993

FEC ID number of contributing federal political committee. **C**

Name of Employer Eastman Chemical Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0790030

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Louis Mothon

Mailing Address 10 Sugar Pine Ln

City State Zip Code  
Methuen MA 01844-1858

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0790036

Amount of Each Receipt this Period  
51.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	203.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Anthony G. Di Tommaso

Mailing Address 115 E 4th St

City State Zip Code  
Hinsdale IL 60521-4601

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Self President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** FF060522.0790052

Amount of Each Receipt this Period  
201.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Jeannette W. Sadler

Mailing Address 617 Kessler Lake Dr

City State Zip Code  
Dallas TX 75208-3943

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation  
Self Employed Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** FF060522.0800005

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Dong Zhang

Mailing Address 3 Daffodil Dr

City State Zip Code  
Nashua NH 03062-3091

FEC ID number of contributing federal political committee. **C**

Name of Employer Nanoterials Occupation  
Nanoterials President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** FF060522.0800006

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 203.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 674 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Lois I. Whitehead

Mailing Address 5382 Laurelton Ave

City State Zip Code  
Garden Grove CA 92845-1536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
651.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0800008

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John W. Hackenbracht

Mailing Address 59956 County Road 9

City State Zip Code  
Newcomerstown OH 43832-9672

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Tastee Apple Inc. Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0800039

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Linda J. Jaffrey

Mailing Address 1101 Rain Tree Rd

City State Zip Code  
Knoxville TN 37923-1982

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Oral & Maxillo Surgical Specialist Technician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: FF060522.0800065

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 675 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Rose Papadopoulos		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 445 West St		<b>Transaction ID:</b> FF060522.0800087	
City State Zip Code Harrison NY 10528-2506	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Izzo Electric, Inc.	Occupation Bookkeeper		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>B.</b> L. O. Selhorst		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 6501 Crown Colony Pl Apt 201		<b>Transaction ID:</b> FF060522.0840001	
City State Zip Code Naples FL 34108-8210	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Dorothy Ann Crozler		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 3405 Stewart Cir		<b>Transaction ID:</b> FF060522.0850039	
City State Zip Code Waco TX 76708-1035	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	301.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 676 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Judith C. Nelson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 2025 La Porte Dr		<b>Transaction ID: FF060522.0860018</b>	
City West Palm Beach	State FL	Amount of Each Receipt this Period 250.00	
Zip Code 33410-1282		Transaction ID: FF060522.0860018	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Elman H. Sandell</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 21 Stonebriar Way		<b>Transaction ID: FF060523.0090001</b>	
City Frisco	State TX	Amount of Each Receipt this Period 300.00	
Zip Code 75034-5938		Transaction ID: FF060523.0090001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	Amount of Each Receipt this Period 300.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Louise Walter</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 8562 Highway B		<b>Transaction ID: FF060523.0110008</b>	
City Higbee	State MO	Amount of Each Receipt this Period 1.00	
Zip Code 65257-2828		Transaction ID: FF060523.0110008	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
Name of Employer Husband	Occupation Secretary	Amount of Each Receipt this Period 1.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	Amount of Each Receipt this Period 1.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	551.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	551.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 677 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Randolph D. Zelov		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 137 Rose Ln		<b>Transaction ID:</b> FF060523.0170007	
City Haverford	State PA	Amount of Each Receipt this Period 1000.00	
Zip Code 19041-1724			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John D. Salisbury		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 1582 Gate Ln		<b>Transaction ID:</b> FF060523.0170017	
City Paradise	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 95969-2319			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Frank Canul		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 167 Ebb Tide Cir Ste 10		<b>Transaction ID:</b> FF060523.0170019	
City Las Vegas	State NV	Amount of Each Receipt this Period 500.00	
Zip Code 89123-1132			
FEC ID number of contributing federal political committee. C			
Name of Employer Escan Construction Company	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 678 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard C. Walling		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006
Mailing Address 700 Mill Creek Rd		<b>Transaction ID:</b> FF060523.0170026
City Gladwyne	State PA	Zip Code 19035-1521
Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Express Marine Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. P. Michael Schelkun, M.D.		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006
Mailing Address 158 York Rd		<b>Transaction ID:</b> FF060523.0170031
City Warminster	State PA	Zip Code 18974-4521
Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer P. Michael Schelkun Md	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Kelly Spears		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006
Mailing Address 1119 W Randol Mill Rd Ste 104		<b>Transaction ID:</b> FF060523.0170033
City Arlington	State TX	Zip Code 76012-6509
Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Lone Star Imaging & Diagnostic Center	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 679 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. M. William Lockard		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 3041 Rolling Stone Rd		<b>Transaction ID:</b> FF060523.0170035	
City State Zip Code Oklahoma City OK 73120-1864	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Billy J. Guin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 924 Erie St		<b>Transaction ID:</b> FF060523.0180002	
City State Zip Code Shreveport LA 71106-1508	Amount of Each Receipt this Period 175.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. R. M. Gordon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address Quaker Hollow Rd		<b>Transaction ID:</b> FF060523.0190007	
City State Zip Code Sewickley PA 15143	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gordon Termit Svc Co	Occupation Business Ex		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	525.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 680 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Mary Eden

Mailing Address 6520 Highway 41 N

City State Zip Code  
Cedar Hill TN 37032-4842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 19 / 2006

Transaction ID: FF060523.0190008

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence O. Mathis

Mailing Address 3118 Wentworth St

City State Zip Code  
Anchorage AK 99508-4345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pan American Engineers Engineers

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 565.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 19 / 2006

Transaction ID: FF060523.0210002

Amount of Each Receipt this Period  
340.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Lois I. Whitehead

Mailing Address 5382 Laurelton Ave

City State Zip Code  
Garden Grove CA 92845-1536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 651.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 19 / 2006

Transaction ID: FF060523.0230001

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1090.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 681 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Dong Zhang</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 3 Daffodil Dr		<b>Transaction ID:</b> FF060523.0240001	
City Nashua	State NH	Amount of Each Receipt this Period 100.00	
Zip Code 03062-3091		FEC ID number of contributing federal political committee. C	
Name of Employer Nanoterials	Occupation President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 376.00			

Full Name (Last, First, Middle Initial) <b>B. Mrs. Susan F. Cray</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 1015 Fox Hill Rd		<b>Transaction ID:</b> FF060523.0360001	
City State College	State PA	Amount of Each Receipt this Period 50.00	
Zip Code 16803-1822		FEC ID number of contributing federal political committee. C	
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 550.00			

Full Name (Last, First, Middle Initial) <b>C. Col. William Brown</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 4825 Stratford Ln SE		<b>Transaction ID:</b> FF060523.0380012	
City Olympia	State WA	Amount of Each Receipt this Period 75.00	
Zip Code 98501-4819		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 301.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 682 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joseph N. Chairge		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 203 Clark Rd		<b>Transaction ID:</b> FF060523.0380013	
City State Zip Code Duryea PA 18642-1112	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Avoca Mach. Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2136.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Dan M. Moody, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 3003 W Alabama St Ste. 600		<b>Transaction ID:</b> FF060523.0390001	
City State Zip Code Houston TX 77098-2001	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Moody Rambin Interests In-c.	Occupation President - Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Shelton W. Boyce		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 74 Pascal Ln		<b>Transaction ID:</b> FF060523.0440002	
City State Zip Code Austin TX 78746-2552	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Certified Public Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 683 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard C. Schultz, Jr.

Mailing Address 9 Country Fair Ln

City State Zip Code  
Scotia NY 12302-3711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Saratoga National Bank Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0440012

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Don U. Deere

Mailing Address 2515 NW 77th Blvd  
Apt T212

City State Zip Code  
Gainesville FL 32606-8681

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0450054

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Calvin L. Thiele

Mailing Address 309 W Jefferson St

City State Zip Code  
Pittsfield IL 62363-1369

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0450063

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 684 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Rosalie M. Cornell

Mailing Address 1010 Scott Park Dr  
Apt 302

City Iowa City State IA Zip Code 52245-3979

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0470034

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Quentin Nigg

Mailing Address PO Box 32

City Hanceville State AL Zip Code 35077-0032

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0470066

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jerome F. Hoelscher

Mailing Address 3702 County Road 125

City Garden City State TX Zip Code 79739-2609

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0490041

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 685 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. James R. Becker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 5830 N Sunny Point Rd		<b>Transaction ID: FF060523.0490042</b>	
City State Zip Code Glendale WI 53209-4428	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Oval Arts Dental Studio	Occupation Dental Technician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Charles W. Wood</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1517 Miramar Dr		<b>Transaction ID: FF060523.0490049</b>	
City State Zip Code Newport Beach CA 92661-1431	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Jere Hogue Hall</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 121 Ponderosa Dr		<b>Transaction ID: FF060523.0500001</b>	
City State Zip Code Kingston TN 37763-7203	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	315.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 686 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Luke Baer

Mailing Address 2800 S 25th Ave

City State Zip Code  
Broadview IL 60155-4532

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bosch Corporation Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0530016

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Donald R. Buxton, Jr.

Mailing Address 400 Rupley Rd

City State Zip Code  
Camp Hill PA 17011-1838

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0530018

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Verda L. Deveny

Mailing Address 9445 Grand Mesa Dr

City State Zip Code  
Las Vegas NV 89134-8933

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 601.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0530075

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 687 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Dion C. Thomas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 374 Arlington Ave		<b>Transaction ID: FF060523.0530085</b>	
City State Zip Code Jersey City NJ 07304-2823	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Local Union #6 Occupation Construction	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert N. Jones, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 18708		<b>Transaction ID: FF060523.0530115</b>	
City State Zip Code Pensacola FL 32523-8708	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sunbelt Industrial Supply Co. Occupation President	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard J. Vance</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 4069 Ramblewood Dr		<b>Transaction ID: FF060523.0530117</b>	
City State Zip Code Troy MI 48085-3622	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Deimer Chrysler Occupation Mathematician	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 688 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Lloyd J. Lano Mailing Address 5660 156th Ln NW City Anoka State MN Zip Code 55303-6101 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> FF060523.0540003 Amount of Each Receipt this Period 250.00
Name of Employer Cinemagic Theaters, Inc Occupation Service Tech Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Don M. Brown Mailing Address 9 Portsmouth Rd City Gallipolis State OH Zip Code 45631-1045 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> FF060523.0540008 Amount of Each Receipt this Period 50.00
Name of Employer Insurance Plus Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Timothy P. Minear Mailing Address 9100 Wilshire Blvd City Beverly Hills State CA Zip Code 90212-3401 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> FF060523.0540013 Amount of Each Receipt this Period 35.00
Name of Employer Twentieth Century Fox Occupation Tv Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>335.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 689 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. George Douglas Laman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1130 E Plant St		<b>Transaction ID:</b> FF060523.0540029	
City State Zip Code Winter Garden FL 34787-2999	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer G.I.I. Incorporated	Occupation General Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Paul M. McCarthy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 836 Lathrop Ave		<b>Transaction ID:</b> FF060523.0540042	
City State Zip Code River Forest IL 60305-1447	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Marquette Bank	Occupation Bank Teller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Oran W. Palmer, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 3327 Duke Ave		<b>Transaction ID:</b> FF060523.0540054	
City State Zip Code Claremont CA 91711-3627	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 690 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Douglas B. Thomas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 409 Woodlawn St		<b>Transaction ID:</b> FF060523.0540068
City State Zip Code Mexico MO 65265-3144	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer 9th Congressional District	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kendall A. Hadler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 4811 Ariane Trl		<b>Transaction ID:</b> FF060523.0540069
City State Zip Code Columbus IN 47201-2725	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Marion Hartunian		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 18625 E Sierra Madre Ave		<b>Transaction ID:</b> FF060523.0540077
City State Zip Code Glendora CA 91741-1823	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 691 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Norman K. Keller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 393 Bleecker St		<b>Transaction ID:</b> FF060523.0540079
City State Zip Code New York NY 10014-2452	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jeffrey T. Allen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1041 Drew Dr		<b>Transaction ID:</b> FF060523.0540088
City State Zip Code Yardley PA 19067-4057	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pricewaterhouse Company, Llp	Occupation C P A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Geraldine K. Conover		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 8927 W 10th St N		<b>Transaction ID:</b> FF060523.0550004
City State Zip Code Wichita KS 67212-4018	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	525.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 692 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Belous Y. Golani

Mailing Address 19664 Fry Oad

City Northville State MI Zip Code 48167

FEC ID number of contributing federal political committee. **C**

Name of Employer V.u Group Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

**Transaction ID:** FF060523.0550015

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Joseph Schoenberger

Mailing Address 27895 Berringer Run

City Westlake State OH Zip Code 44145-3061

FEC ID number of contributing federal political committee. **C**

Name of Employer Russell Berkedile & Assoc. Occupation Doctor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

**Transaction ID:** FF060523.0550016

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Willie F. Bond

Mailing Address 805 Mississippi St

City Monroe State LA Zip Code 71202-4230

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

**Transaction ID:** FF060523.0550038

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 693 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Rodger M. West

Mailing Address 859 Chestnut Lake Dr NE

City State Zip Code  
Marietta GA 30068-4215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alliance Partners Inc. Real Estate Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0550115

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Judith L. Goodman

Mailing Address 1422 Washington Dr

City State Zip Code  
Stafford VA 22554-2011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lockheed Martin Budget Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0570002

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William F. Schaefer

Mailing Address 36 Circle Dr

City State Zip Code  
Rumson NJ 07760-1112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Self - Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0570011

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 694 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Norton J. Jacobs

Mailing Address HC 1 Box 1274

City State Zip Code  
Strawberry AZ 85544-9742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hankel & Carpenter Dds, Ltd Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0570018

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Anthony M. Monaco

Mailing Address 1955 Williamsbridge Rd

City State Zip Code  
Bronx NY 10461-1613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0570022

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Francis J. Blanchard, Jr.

Mailing Address 1022A Council Dr

City State Zip Code  
Alexandria LA 71303-5756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0630024

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 695 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John P. Judge

Mailing Address 1710 Grandview Dr E Suite-E

City Garden City State KS Zip Code 67846-8489

FEC ID number of contributing federal political committee. **C**

Name of Employer Cowell Banker The Real Estate Shop Inc Occupation Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0640002

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lui G. Damasceno

Mailing Address 10430 Nancy Dr

City Meadville State PA Zip Code 16335-6328

FEC ID number of contributing federal political committee. **C**

Name of Employer The Brooks Group Occupation Business Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0640005

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roger W. Clark

Mailing Address 933 Radcliffe Ave

City Bakersfield State CA Zip Code 93305-1127

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0650004

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 696 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. N. Richard Huser

Mailing Address 2611 Windridge Ct

City State Zip Code  
Fort Wayne IN 46845-1921

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 506.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0650005

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William Millspaugh

Mailing Address 254 Sequoia Ct  
Apt 17

City State Zip Code  
Thousand Oaks CA 91360-3816

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 901.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0650006

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Dave L. Lott

Mailing Address 40160 Onyx St

City State Zip Code  
Slidell LA 70461-3820

FEC ID number of contributing federal political committee. **C**

Name of Employer Air Force Cooling Heating Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0650007

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 697 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William E. Ristau

Mailing Address 300 E Joe Orr Rd

City State Zip Code  
Chicago Hts IL 60411-1215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Century Steel Llc President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0650008

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Bernice Osunwa-Ivoko

Mailing Address 10945 South St Ste 202A

City State Zip Code  
Cerritos CA 90703-5366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0660001

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Kielirnoos Islam

Mailing Address 2101 S Decatur Blvd Ste 6

City State Zip Code  
Las Vegas NV 89102-8506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0660002

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 698 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Raymond Gutkoska		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2601 Wilkens Ave		<b>Transaction ID:</b> FF060523.0660007	
City State Zip Code Baltimore MD 21223-3314	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Spirits West Inc.	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Leola Jones		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1959 E 71st St		<b>Transaction ID:</b> FF060523.0660008	
City State Zip Code Chicago IL 60649-2005	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Gary Haarer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 12183 E Sand Hills Rd		<b>Transaction ID:</b> FF060523.0660011	
City State Zip Code Scottsdale AZ 85255-3103	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Home Builder		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 699 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Kerry Jensen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 88 E 900 N		Transaction ID: FF060523.0660012	
City State Zip Code Price UT 84501-1824	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Restoration Owner/ Operator Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Mr. Jayme A. Koup		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1239 P Rd		Transaction ID: FF060523.0660017	
City State Zip Code Eureka KS 67045-4713	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Funeral Director / Owner Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Mr. Terrence Vogel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 100 MacGregor Ridge Rd		Transaction ID: FF060523.0660022	
City State Zip Code Stafford VA 22554-5204	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Self Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 700 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Pamela Su

Mailing Address 6655 Frank Ave NW

City State Zip Code  
North Canton OH 44720-7259

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED    Occupation INFO REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0660024

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Amy Martin

Mailing Address 4216 Beverly Ave

City State Zip Code  
Jacksonville FL 32210-2103

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED    Occupation INFO REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0660030

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rebecca Pfannenstiel

Mailing Address 1835 Munjor Rd

City State Zip Code  
Hays KS 67601-9523

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED    Occupation INFO REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0660031

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 701 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ray G. Sutherland

Mailing Address 230 Eglin Pkwy SE

City State Zip Code  
Fort Walton Beach FL 32548-5811

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0670003

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Nancy Zoraian

Mailing Address 339 W Broad St

City State Zip Code  
Westfield NJ 07090-4103

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0670009

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edward F. Hoyle

Mailing Address 789 S Oakland St

City State Zip Code  
Aurora CO 80012-3251

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Construction

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0670011

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 702 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Douglas Lambeth

Mailing Address 366 E Isabella Rd

City State Zip Code  
Midland MI 48640-8348

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0670014

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Marilyn A. Cole

Mailing Address 2638 Crenshaw Blvd

City State Zip Code  
Los Angeles CA 90016-3006

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Chef

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0670015

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Sudre

Mailing Address 1506 Broadway

City State Zip Code  
Riviera Beach FL 33404-5626

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0670016

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 703 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Deanna L. Davis

Mailing Address 109 NW Main St

City Ennis State TX Zip Code 75119-4053

FEC ID number of contributing federal political committee. **C**

Name of Employer  
INFO REQUESTED

Occupation  
INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0670018

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles Dallis

Mailing Address PO Box 204

City Johnston State SC Zip Code 29832-0204

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self

Occupation  
Self

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0670020

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Robert L. Tran-Truonngj

Mailing Address PO Box 5108

City Anaheim State CA Zip Code 92814-1108

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0670022

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 704 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Tessie Uniza</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1010 E Charleston Blvd		<b>Transaction ID: FF060523.0670023</b>	
City State Zip Code Las Vegas NV 89104-1518	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Phil-AM Realty	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Laura K. Fitzgerald</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 9592		<b>Transaction ID: FF060523.0670024</b>	
City State Zip Code Savannah GA 31412-9592	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fitzgerald Forwarding Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Christopher J. Walters</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 839 Wake Forest Bus Park Ste B Ste B		<b>Transaction ID: FF060523.0690001</b>	
City State Zip Code Wake Forest NC 27587-7335	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wake Forest Physical Therapy	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 705 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jorge Y. Medovoi		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 18611 Rocoso Pl		<b>Transaction ID:</b> FF060523.0700006	
City State Zip Code Tarzana CA 91356-5322	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Yoranco Properties Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kirk K. Meurer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 5505 Valley Belt Rd Ste F Ste F		<b>Transaction ID:</b> FF060523.0700008	
City State Zip Code Brooklyn Heights OH 44131-1447	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Modular Systems Technicians Inc Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. George N. Klimis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 27 E Orange St		<b>Transaction ID:</b> FF060523.0700009	
City State Zip Code Tarpon Springs FL 34689-3439	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation George N. Klimis, Attorney Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 706 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ronald Schwartz

Mailing Address 5353 Crystyl Ranch Dr

City State Zip Code  
Concord CA 94521-5412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Venturs in Motion LLC Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

**Transaction ID:** FF060523.0710003

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Lucia Ellis Uihlein

Mailing Address 1001 Sheridan Rd

City State Zip Code  
Lake Bluff IL 60044-1363

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

**Transaction ID:** FF060523.0730017

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Donald A. Gooss, Sr.

Mailing Address 36119 Windmere Ct

City State Zip Code  
Willards MD 21874-1198

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Selbyville Animal Hospital Veterinarian

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 225.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

**Transaction ID:** FF060523.0730056

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 707 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Ann Sheward

Mailing Address 1739 Harrison Rd

City State Zip Code  
Jackson OH 45640-8836

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Theta Pro. 2 Serve Mgmt. Co. LLC

Occupation  
Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0740040

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Margaret Sheridan

Mailing Address 29 Village Ln

City State Zip Code  
Bronxville NY 10708-4805

FEC ID number of contributing federal political committee. **C**

Name of Employer

Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0750020

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Fred Laferriere

Mailing Address PO Box 37

City State Zip Code  
St Johnsbury VT 05819-0037

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Fred Laferriere's Home Dct-g. In

Occupation  
Data Processing Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0800004

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 708 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas A. Berard

Mailing Address 812 Cypress St

City State Zip Code  
Manistee MI 49660-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0800020

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Guy E. Abraham

Mailing Address 5 Openbrand Rd

City State Zip Code  
Rolling Hills CA 90274-5231

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Md

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1366.60

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0810008

Amount of Each Receipt this Period  
1366.60

**C.** Full Name (Last, First, Middle Initial)  
Mr. John H. Crawford

Mailing Address 20128 Chateau Dr

City State Zip Code  
Saratoga CA 95070-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Intel Corp. Occupation  
Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0810020

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2116.60

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 709 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Mike Roth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 13638 Oak St		<b>Transaction ID:</b> FF060523.0810021
City State Zip Code Kansas City MO 64145-1458	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Great Plains Drilling	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Dr. James M. Duvall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 289 Cajon St		<b>Transaction ID:</b> FF060523.0810022
City State Zip Code Laguna Beach CA 92651-1335	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Nicholas W. Glaser, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1508 Ocala Rd		<b>Transaction ID:</b> FF060523.0810031
City State Zip Code Louisville KY 40222-6661	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer All Childrens Pediatric	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 710 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kelvin D. Van Osdol

Mailing Address 3989 E Glen Abbey Dr

City State Zip Code  
Springfield MO 65809-4689

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
St. Johns Clinic Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0810062

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Irving P. Graeb, Jr.

Mailing Address 238 E Broadway

City State Zip Code  
Roslyn NY 11576-2136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0810083

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Arthur W. Crampton, Jr.

Mailing Address 59 Lee Dr

City State Zip Code  
Concord MA 01742-1510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 330.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0820015

Amount of Each Receipt this Period  
165.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 740.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 711 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Capt. Thomas Leroy Sanders, Sr.

Mailing Address PO Box 731

City State Zip Code  
Clinton SC 29325-0731

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0820023

Amount of Each Receipt this Period  
55.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. H. Guy Hardy

Mailing Address 12700 Lake Ave Apt 613

City State Zip Code  
Cleveland OH 44107-1547

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0820030

Amount of Each Receipt this Period  
55.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Walter L. Whitcomb, Jr.

Mailing Address 39480 N Cambridge Blvd

City State Zip Code  
Beach Park IL 60083-3033

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 666.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0820082

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	160.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 712 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Parker Conrad, Sr.

Mailing Address PO Box 790

City State Zip Code  
**Morgan City LA 70381-0790**

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 22 / 2006**

**Transaction ID: FF060523.0820091**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles C. Tilghman

Mailing Address 6403 NW Grand Blvd

City State Zip Code  
**Nichols Hills OK 73116-6503**

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 22 / 2006**

**Transaction ID: FF060523.0830060**

Amount of Each Receipt this Period  
**350.00**

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth J. Fedarko

Mailing Address 802 N 22nd Pl Apt 228B

City State Zip Code  
**Phoenix AZ 85006-3874**

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **261.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 22 / 2006**

**Transaction ID: FF060523.0830085**

Amount of Each Receipt this Period  
**30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>630.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 713 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Aaron Whitley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 11555 E Nc Highway 97 PO Box 1817		<b>Transaction ID: FF060523.0830091</b>	
City State Zip Code Rocky Mount NC 27803-5869	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 361.00	

Full Name (Last, First, Middle Initial) <b>B. Col. David H. Staley, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 7515 W Mission View Pl		<b>Transaction ID: FF060523.0830094</b>	
City State Zip Code Tucson AZ 85743-5418	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. J. P. Mc Goldrick</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1613 S Cresthill Dr		<b>Transaction ID: FF060523.0830096</b>	
City State Zip Code Spokane WA 99203-3551	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 451.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 714 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Kenneth Yeung		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 3536 Arden Rd		Transaction ID: FF060523.0840015	
City State Zip Code Hayward CA 94545-3908	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Prince Of Peace Enterprises Inc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Calvin S. Kim		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1314 S King St Ste 520		Transaction ID: FF060523.0840016	
City State Zip Code Honolulu HI 96814-1940	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Richway Intl. Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mike M. Wong		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 179 Chrystie St		Transaction ID: FF060523.0840018	
City State Zip Code New York NY 10002-1202	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mikco Building Material Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 715 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Levi W. Hill, III

Mailing Address 1006 Johns Rd

City State Zip Code  
Augusta GA 30904-6104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Richmond Supply Co Industrial Products Distributor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0840031

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Albert H. Wohlers

Mailing Address 750 N Prospect Ave

City State Zip Code  
Park Ridge IL 60068-2765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0840035

Amount of Each Receipt this Period  
220.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Wilhelmine E. Long

Mailing Address 1817 W Norwood St

City State Zip Code  
Chicago IL 60660-2311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0840046

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	670.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 716 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. J. Wilson Thomas

Mailing Address 16402 Lauder Ln

City State Zip Code  
Dallas TX 75248-2352

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Snyder Brick Company Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2006

**Transaction ID:** FF060523.0840090

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Faye Ling

Mailing Address 1741 Torrance Blvd  
Ste B

City State Zip Code  
Torrance CA 90501-1725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Associates Representatives Com President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2006

**Transaction ID:** FF060523.0850033

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Helen S. Cox

Mailing Address 753 Majorca Ave

City State Zip Code  
Coral Gables FL 33134-3754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1675.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2006

**Transaction ID:** FF060523.0850034

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 717 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David L. Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 2512 Fairmont Ave		<b>Transaction ID:</b> FF060523.0850062
City State Zip Code Dayton OH 45419-1510	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jorge Garrido		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 2600 SW 128th Ave		<b>Transaction ID:</b> FF060523.0850071
City State Zip Code Miami FL 33175-2002	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. John T. Evans, II		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 8350 N Central Expy Ste 1300		<b>Transaction ID:</b> FF060523.0850105
City State Zip Code Dallas TX 75206-1620	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Marshall	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 718 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. O. V. Bennett, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 211 E 7th St Ste 712		<b>Transaction ID:</b> FF060523.0860002	
City Austin	State TX	Amount of Each Receipt this Period 100.00	
Zip Code 78701-3218		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Self Employed	Occupation Mgmt Consultant, Insurance & Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Pastor Joyce H. Darby		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 100 Valley St Lot 21		<b>Transaction ID:</b> FF060523.0860003	
City Lafayette	State LA	Amount of Each Receipt this Period 103.00	
Zip Code 70507-5642		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Self	Occupation Minister		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.72		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID:</b> FF060523.0860014	
City Pasadena	State CA	Amount of Each Receipt this Period 20.00	
Zip Code 91106-3252		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	223.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 719 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID:</b> FF060523.0860015	
City Pasadena	State CA	Amount of Each Receipt this Period 20.00	
Zip Code 91106-3252			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID:</b> FF060523.0860016	
City Pasadena	State CA	Amount of Each Receipt this Period 20.00	
Zip Code 91106-3252			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID:</b> FF060523.0860017	
City Pasadena	State CA	Amount of Each Receipt this Period 20.00	
Zip Code 91106-3252			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	60.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 720 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Gail C. Brochu

Mailing Address PO Box 1445

City State Zip Code  
Edgartown MA 02539-1445

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060523.0860022

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John Andricks

Mailing Address 415 W Mahanoy Ave

City State Zip Code  
Girardville PA 17935-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060523.0860028

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David Dutton

Mailing Address 975 Bush St # 212

City State Zip Code  
San Francisco CA 94109-6313

FEC ID number of contributing federal political committee. **C**

Name of Employer Williams-sonoma Occupation Receiving Clerk

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060523.0860032

Amount of Each Receipt this Period  
1.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 51.50

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 721 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Kenneth J. Fedarko		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 802 N 22nd Pl Apt 228B		<b>Transaction ID:</b> FF060523.0860036
City Phoenix	State AZ	
Zip Code 85006-3874		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 261.00

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Virgilio L. Diaz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 5930 SW 16th St		<b>Transaction ID:</b> FF060523.0860042
City Miami	State FL	
Zip Code 33155-2107		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired		Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Dorothy E. Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 445 Wawona St Apt 310		<b>Transaction ID:</b> FF060523.0860071
City San Francisco	State CA	
Zip Code 94116-3070		Amount of Each Receipt this Period 121.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 302.00

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	151.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 722 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Audrey M. Hickman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 109 Flora Dr		<b>Transaction ID:</b> FF060523.0860075	
City State Zip Code Haines City FL 33844-5801	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John D. Pumper		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 8460 Sanctuary Dr		<b>Transaction ID:</b> FF060523.0870001	
City State Zip Code Mentor OH 44060-8803	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Theresa M. Thombs		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 4416 McLean Rd Ste A		<b>Transaction ID:</b> FF060523.0880006	
City State Zip Code Fort Worth TX 76117-1840	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Rockaway Company	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 723 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Carlos H. Gamboa, Sr.

Mailing Address 291 Paris St

City State Zip Code  
San Francisco CA 94112-2022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Gamboa Sewing Machine Mechanic

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 566.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0880014

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Alan L. Lewitzke

Mailing Address PO Box 249

City State Zip Code  
Mosinee WI 54455-0249

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
L & S Electric Inc Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0880026

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Carlos H. Gamboa, Sr.

Mailing Address 291 Paris St

City State Zip Code  
San Francisco CA 94112-2022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Gamboa Sewing Machine Mechanic

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 566.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0880035

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 724 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lily Wang

Mailing Address 24808 Mill Valley Way

City Carson State CA Zip Code 90745-6452

FEC ID number of contributing federal political committee. **C**

Name of Employer Kotai Realty Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060523.0880036

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Jane M. Kaufer

Mailing Address 209 E Washington St Ste 300 Ste 300

City Ann Arbor State MI Zip Code 48104-2011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060523.0880056

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
Dessalines Desilus

Mailing Address 411 NE 38th St

City Pompano Beach State FL Zip Code 33064-4345

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 452.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060523.0890002

Amount of Each Receipt this Period  
202.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1212.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 725 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Raymond C. Hall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 17812 Tri County Rd		<b>Transaction ID:</b> FF060523.0890003	
City State Zip Code Alta Vista KS 66834-9200	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles N. Reeves		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 325 Middleton Rd		<b>Transaction ID:</b> FF060523.0890013	
City State Zip Code Grovetown GA 30813-4616	Amount of Each Receipt this Period 101.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harold M. Wit		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 150 E 69th St # 19N		<b>Transaction ID:</b> FF060523.0890020	
City State Zip Code New York NY 10021-5704	Amount of Each Receipt this Period 501.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3001.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	703.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 726 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Carlos H. Gamboa, Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 291 Paris St		Transaction ID: FF060523.0890024	
City State Zip Code San Francisco CA 94112-2022	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gamboa Sewing Machine	Occupation Mechanic		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 566.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Mund A. Shaikly</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 1100		Transaction ID: FF060523.0890026	
City State Zip Code Westcliffe CO 81252-1100	Amount of Each Receipt this Period 151.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. James G. Morgan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 8701 W Dodge Rd		Transaction ID: FF060523.0890037	
City State Zip Code Omaha NE 68114-3429	Amount of Each Receipt this Period 251.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Employed	Occupation Oral Surgeon		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	453.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 727 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Geraldine K. Conover		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 8927 W 10th St N		<b>Transaction ID:</b> FF060523.0890047	
City Wichita	State KS	Zip Code 67212-4018	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 276.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Glenda S. Parker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2 Walnut Dr		<b>Transaction ID:</b> FF060523.0890057	
City Cartersville	State GA	Zip Code 30120-4014	Amount of Each Receipt this Period 201.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Margaret E. Zick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 425 E Main St SE		<b>Transaction ID:</b> FF060523.0890070	
City Caledonia	State MI	Zip Code 49316-9437	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	353.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 728 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Lewis

Mailing Address 39 Little Comfort Rd

City Savannah State GA Zip Code 31411-1456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0890072

Amount of Each Receipt this Period  
201.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bryan Bair

Mailing Address 8850 Crest Ln

City Springdale State AR Zip Code 72762-9334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0890078

Amount of Each Receipt this Period  
201.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James M. Hirsch

Mailing Address 90 Ravenwood Dr

City San Francisco State CA Zip Code 94127-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0890111

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>503.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 729 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Brett Purvis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 3 High St Unit 2A		<b>Transaction ID:</b> FF060523.0900005	
City Sanbornville	State NH	Amount of Each Receipt this Period 1.00	
Zip Code 03872-4365		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Brett S. Purvis & Associates	Occupation Owner	Aggregate Year-to-Date ▼ 501.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Ernest C. Martelli, III		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 4 Louise Dr		<b>Transaction ID:</b> FF060523.0900010	
City Warminster	State PA	Amount of Each Receipt this Period 1.00	
Zip Code 18974-1526		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Martelli's Metal Fabrication Inc.	Occupation President	Aggregate Year-to-Date ▼ 251.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Brent E. Laidler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 521 Main St		<b>Transaction ID:</b> FF060523.0910001	
City Lafayette	State IN	Amount of Each Receipt this Period 50.00	
Zip Code 47901-1446		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Brent's Bench	Occupation Owner	Aggregate Year-to-Date ▼ 451.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	52.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 730 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Constance H. Stilwell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 425 Winn Way Apt 228		<b>Transaction ID:</b> FF060523.0910002
City State Zip Code Decatur GA 30030-1734	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Constance Q. Higbie		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 93 Kenwood Rd		<b>Transaction ID:</b> FF060523.0910003
City State Zip Code Grosse Pointe Farm MI 48236-3608	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Julia A. Manley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 125 Pickett St		<b>Transaction ID:</b> FF060523.0910004
City State Zip Code Plainfield IN 46168-1321	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James A. Mathers

Mailing Address 11228 W County Road 150 N

City State Zip Code  
French Lick IN 47432-9778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Springs Valley Wood Products Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0910005

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jerry M. Place

Mailing Address 1008 E 250 S

City State Zip Code  
Bountiful UT 84010-3007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Westco Development Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0910008

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Paul W. Boyd

Mailing Address 30 Community Dr Apt 221

City State Zip Code  
Camden ME 04843-2066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0910012

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 732 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert G. Siegel

Mailing Address 48 Eton Rd

City State Zip Code  
Larchmont NY 10538-1424

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Real Estate Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
651.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0910013

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. George Brett

Mailing Address 185 Charles E Jordan Rd

City State Zip Code  
Cape Eliz ME 04107-2523

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
281.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0910014

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Laura A. Eaves

Mailing Address PO Box 1529

City State Zip Code  
McCamey TX 79752-1529

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0910015

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 733 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John C. Thrash

Mailing Address 10000 Memorial Dr Ste 250  
Ste. 250

City State Zip Code  
Houston TX 77024-3444

FEC ID number of contributing federal political committee. **C**

Name of Employer E-corp Usa      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1150.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0910017

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Buck J. Miller

Mailing Address 4401 Stanhope St  
Ste 665

City State Zip Code  
Dallas TX 75205-1664

FEC ID number of contributing federal political committee. **C**

Name of Employer Self      Occupation Rancher

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0910019

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James H. Pemberton

Mailing Address PO Box 1538

City State Zip Code  
Belton TX 76513-5538

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      361.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060523.0910020

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►      1300.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 734 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John W. Bourdeaux		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2201 Wolf St Apt 1206		Transaction ID: FF060523.0910021	
City Dallas	State TX	Zip Code 75201-1123	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Shirley C. Lowe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 8001 W 71st Ave Apt 64C		Transaction ID: FF060523.0910023	
City Arvada	State CO	Zip Code 80004-1802	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. George C. Chao		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 11207 Queens Blvd		Transaction ID: FF060523.0910025	
City Forest Hills	State NY	Zip Code 11375-5554	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Alexander Chao D.d. S., P. C.		Occupation Administrative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 551.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	685.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 735 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Earl S. Berg		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1934 Oak Tree Trl		<b>Transaction ID:</b> FF060523.0910026
City Lake Villa	State IL	Zip Code 60046-7564
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Joan Donahoe		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1704 E Edgewood Pl		<b>Transaction ID:</b> FF060523.0910027
City Sioux Falls	State SD	Zip Code 57103-4568
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Retired	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Olive L. Morrill		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address PO Box 139		<b>Transaction ID:</b> FF060523.0910028
City La Crosse	State FL	Zip Code 32658-0139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 736 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Helen J. Bradley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 122		<b>Transaction ID: FF060523.0910031</b>	
City <b>Ctr Tuftnboro</b>	State <b>NH</b>	Zip Code <b>03816-0122</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Daniel W. Wulff</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 4924 N Elgin St		<b>Transaction ID: FF060523.0910033</b>	
City <b>Spokane</b>	State <b>WA</b>	Zip Code <b>99205-5642</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 411.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Anthony A. Franchi</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2 Wood Ridge Rd		<b>Transaction ID: FF060523.0910035</b>	
City <b>Weston</b>	State <b>MA</b>	Zip Code <b>02493-1929</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 737 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Bassam Mattar</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 26 N Sagebrush Cir		<b>Transaction ID: FF060523.0910036</b>	
City Wichita	State KS	Zip Code 67230-6634	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Cancer Center Of Cancer	Occupation Md		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Max C. Weeks</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 9910 NE 136th St		<b>Transaction ID: FF060523.0910037</b>	
City Liberty	State MO	Zip Code 64068-8215	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Gerald J. Riga</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 223 Gemstone Cir		<b>Transaction ID: FF060523.0910039</b>	
City Camdenton	State MO	Zip Code 65020-4827	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	625.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 738 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Carl E. Thompson, Jr.  
Mailing Address 218 Berry Ave  
City Versailles State KY Zip Code 40383-1457  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Kroger Company Occupation Clerk  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6  
Transaction ID: FF060523.0910043  
Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Alice Gould  
Mailing Address 77 Fountain Grove Cir  
City Napa State CA Zip Code 94558-2486  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFO REQUESTED Occupation INFO REQUESTED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6  
Transaction ID: FF060523.0910045  
Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James F. McCloud  
Mailing Address 6 Clarewood Mall  
City Oakland State CA Zip Code 94618-2245  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6  
Transaction ID: FF060523.0910046  
Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 900.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 739 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Lloyd P. Shepherd		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 58484 Buffalo Mine Rd		<b>Transaction ID:</b> FF060523.0910047	
City State Zip Code Senecaville OH 43780-9711	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2403.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Sherry D. Boon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1644 Williamsburg Dr		<b>Transaction ID:</b> FF060523.0910050	
City State Zip Code Bossier City LA 71112-3164	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wilison	Occupation Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John J. Siergiewicz, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 295 S Merrimack Rd		<b>Transaction ID:</b> FF060523.0910052	
City State Zip Code Hollis NH 03049-6242	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hollis Line Machine Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 740 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Byron E. Hummon, Jr. Mailing Address 950 N Tyler Rd City State Zip Code Wichita KS 67212-3240 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: FF060523.0910054 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	2		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	2		2	0	0	6														
500.00																							
Name of Employer Hummon Corporation Occupation Geologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																					
1000.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Dr. George R. Zimmerman Mailing Address 424 North St City State Zip Code Burlington IA 52601-4822 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: FF060523.0920003 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	2		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	2		2	0	0	6														
500.00																							
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00																					
500.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Claude C. Blakemore Mailing Address 1822 Altamira Pl City State Zip Code San Diego CA 92103-1202 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: FF060523.0920004 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	2		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	2		2	0	0	6														
50.00																							
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>451.00</td> </tr> </table>		451.00																					
451.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 741 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Louis W. Haas

Mailing Address 54 Lime Kiln Rd

City State Zip Code  
Dover Plains NY 12522-5506

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0920005

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Ebby Halliday Acers

Mailing Address PO Box 12348

City State Zip Code  
Dallas TX 75225-0348

FEC ID number of contributing federal political committee. **C**

Name of Employer Ebby Halliday Realty Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0920007

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard S. Griffith

Mailing Address 3417 Milam St

City State Zip Code  
Houston TX 77002-9531

FEC ID number of contributing federal political committee. **C**

Name of Employer Richard S Griffiths Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 860.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0920008

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 742 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. D. Michael Meeks

Mailing Address 8449 Lansingwood Cv

City State Zip Code  
Germantown TN 38139-5239

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0920009

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Antonia B. Rodriguez

Mailing Address 5320 Spreading Branch Rd

City State Zip Code  
Hope Mills NC 28348-2082

FEC ID number of contributing federal political committee. **C**

Name of Employer Wamac Center Occupation Medical Transcripionist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0920010

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William M. Snow, Jr.

Mailing Address 532 Northpark Dr

City State Zip Code  
Bossier City LA 71111-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 821.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0920013

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 743 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. J. F. Henry

Mailing Address 201 Northview Rd

City State Zip Code  
Canfield OH 44406-1159

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0920016

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Miss Marcella E. Schneider

Mailing Address 842 Van Buren Ave

City State Zip Code  
Saint Paul MN 55104-1664

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0920017

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Lehmann

Mailing Address 310 N Midvale Blvd

City State Zip Code  
Madison WI 53705-3265

FEC ID number of contributing federal political committee. **C**

Name of Employer Home Security Of America Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0920020

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 744 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Donald L. Schleicher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 210 S Bluemound Dr		<b>Transaction ID:</b> FF060523.0920021
City State Zip Code Appleton WI 54914-3924	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Lifetime Retirement Planning I	Occupation Planner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John P. Carr		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 305 S Broadway Ave		<b>Transaction ID:</b> FF060523.0920022
City State Zip Code Tyler TX 75702-7307	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Carr Resources Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. June J. Stevens		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 3936 Orchid Ave		<b>Transaction ID:</b> FF060523.0920027
City State Zip Code Kensett IA 50448-7564	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 745 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold Gilmore

Mailing Address 3665 S County Road 300 E

City State Zip Code  
Liberty IN 47353-9332

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0920030

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Fern R. King

Mailing Address 701 E Village Creek Rd

City State Zip Code  
Connersville IN 47331-3237

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0920031

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. K. Hart, Jr.

Mailing Address 10036 Hillgreen Cir Apt K

City State Zip Code  
Cockeysville MD 21030-3426

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0920032

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 746 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Tomislav Iricanin

Mailing Address 3724 Lorings Rd

City State Zip Code  
Norman OK 73072-0214

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 901.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0920036

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Joan Gallagher

Mailing Address 1926 Canterbury Ct  
Apt 102

City State Zip Code  
Lynchburg VA 24503-2243

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0920037

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frederick W. Guardabassi

Mailing Address 915 Middle River Dr  
Ste 421

City State Zip Code  
Fort Lauderdale FL 33304-3561

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0920039

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 748 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Salim S. Al-Salem		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 490 Forest Ave		<b>Transaction ID:</b> FF060523.0920051	
City State Zip Code Paramus NJ 07652-4704	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ny Med College	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Donald E. Bissing		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 195 Brickleberry Dr		<b>Transaction ID:</b> FF060523.0920054	
City State Zip Code Roswell GA 30075-3069	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1106.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Daniel F. McGinn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 29 Marbella		<b>Transaction ID:</b> FF060523.0920055	
City State Zip Code Dana Point CA 92629-4118	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mc Grim Actuaries	Occupation Actuary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 749 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Hans W. Becherer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2 Orchard Hill Dr		<b>Transaction ID:</b> FF060523.0920059	
City Moline	State IL	Zip Code 61265-7154	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1176.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sarah L. Klein		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 5201		<b>Transaction ID:</b> FF060523.0920060	
City Sun City Center	State FL	Zip Code 33571-5201	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Linda K. Hair		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 8333 Greenridge Rd		<b>Transaction ID:</b> FF060523.0920064	
City North Charleston	State SC	Zip Code 29406-9741	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	775.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 750 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Daniel B. Nail		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1140 Lighthouse Blvd		<b>Transaction ID:</b> FF060523.0920066	
City State Zip Code Charleston SC 29412-8924	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John J. Brogan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 400 N Flagler Dr Apt 1906		<b>Transaction ID:</b> FF060523.0920067	
City State Zip Code West Palm Beach FL 33401-4316	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Lawrence E. Pawl		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 515 Michigan St NE Ste 301		<b>Transaction ID:</b> FF060523.0920068	
City State Zip Code Grand Rapids MI 49503-5721	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 751 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Joan M. Halbruegger

Mailing Address 5845 Nottingham Ave  
Apt 4

City State Zip Code  
Saint Louis MO 63109-2736

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0920069

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steve Robinson, Sr.

Mailing Address 1417 S 1st Capitol Dr

City State Zip Code  
Saint Charles MO 63303-3703

FEC ID number of contributing federal political committee. **C**

Name of Employer Webster Motor Co. Ltd. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0920075

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Robert J. Fleischaker, MD

Mailing Address 4620 Serigraph Ct

City State Zip Code  
Oceanside CA 92057-6809

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0920077

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 752 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Glen H. Wright

Mailing Address 5295 Wedgewood Dr

City State Zip Code  
Olive Branch MS 38654-8233

FEC ID number of contributing federal political committee. **C**

Name of Employer Direct General Corp. Occupation Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0920078

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John M. Kary

Mailing Address 1514 N 40th St

City State Zip Code  
Seattle WA 98103-8138

FEC ID number of contributing federal political committee. **C**

Name of Employer Quality Food Center Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0920081

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Billy J. Swinehart

Mailing Address 9210 Bonhomme Rd

City State Zip Code  
Houston TX 77074-6614

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930001

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 753 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert C. Crozier		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 7558 Beal St		<b>Transaction ID:</b> FF060523.0930002	
City State Zip Code San Diego CA 92111-4325	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Harry Richard Schumacher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 47 E 88th St		<b>Transaction ID:</b> FF060523.0930008	
City State Zip Code New York NY 10128-1152	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Caleb S. Dano		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 562		<b>Transaction ID:</b> FF060523.0930013	
City State Zip Code Mahwah NJ 07430-0562	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 676.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	270.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 754 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul Wojnowich

Mailing Address 2969 Eppington South Dr

City State Zip Code  
Fort Mill SC 29708-6949

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Highland Mills Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0930014

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Margaret Wright

Mailing Address PO Box 1

City State Zip Code  
Grafton IL 62037-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Tara Point Inn & Cottages Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0930015

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Virginia L. Lonning

Mailing Address 286 Desert Lakes Dr  
Apt. 217

City State Zip Code  
Palm Springs CA 92264-5514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060523.0930019

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 755 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert Sunderland

Mailing Address 953 Pyrite Ave

City Henderson State NV Zip Code 89015-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930020

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Fred U. Goshe

Mailing Address 590 S Township Road 159

City Tiffin State OH Zip Code 44883-8749

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930024

Amount of Each Receipt this Period  
 150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edward W. Shineman, Jr.

Mailing Address 455 N End Ave Apt 411

City New York State NY Zip Code 10282-1133

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930026

Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 756 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roberto Nodarse

Mailing Address 173 E Roland St

City State Zip Code  
Azusa CA 91702-4900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2006

Transaction ID: FF060523.0930027

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Harvey S. Walseth

Mailing Address 436 Stanley Dr

City State Zip Code  
Santa Barbara CA 93105-3726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
321.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2006

Transaction ID: FF060523.0930029

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Van K. Vo, DDS

Mailing Address 2051 N Fresno St

City State Zip Code  
Fresno CA 93703-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2006

Transaction ID: FF060523.0930030

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>385.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 757 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Milka Ambrus

Mailing Address 6325 Via Del Plz

City State Zip Code  
Rch Palos Vrd CA 90275-6585

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930031

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Joan M. Wegner

Mailing Address 2 Lochinvar Ln

City State Zip Code  
Oak Brook IL 60523-1613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jel Set Co. Executive

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1150.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930035

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Nicholas A. Cummings

Mailing Address 4400 N Scottsdale Rd

City State Zip Code  
Scottsdale AZ 85251-3331

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nicholas & Dorothy Cummin-  
gs Foundation Psychologist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930036

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 758 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jerome R. Wilms		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 936 W Greenfield Ave		<b>Transaction ID:</b> FF060523.0930038
City State Zip Code Milwaukee WI 53204-2822	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Metro-clean Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Shirley R. Moore		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 917 Stagecoach Dr		<b>Transaction ID:</b> FF060523.0930039
City State Zip Code Georgetown TX 78628-2876	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Bryan E. Stampley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1801 Bow Ridge Cv		<b>Transaction ID:</b> FF060523.0930040
City State Zip Code Cedar Park TX 78613-1412	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Texas Dept. Of Transportation Occupation Civil Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1175.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 759 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Esther H. Chapman

Mailing Address 2956 E Del Mar Blvd  
Apt 243

City Pasadena State CA Zip Code 91107-4388

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0930042

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard Seaver

Mailing Address 538 S Flower St

City Los Angeles State CA Zip Code 90071-2501

FEC ID number of contributing federal political committee. **C**

Name of Employer Hydril Co. Occupation Corporate Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0930047

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James D. Kelly

Mailing Address 345 S Chase St

City Sierra Vista State AZ Zip Code 85635-8217

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 602.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0930048

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 760 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Gail C. Campbell

Mailing Address 20611 Parkfield Ave

City State Zip Code  
Jordan MN 55352-9428

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930050

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Clifford W. Wheeler

Mailing Address PO Box 1610

City State Zip Code  
Athens TX 75751-1610

FEC ID number of contributing federal political committee. **C**

Name of Employer Wheeler Company/ Occupation Investment Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930051

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald A. Pelowski

Mailing Address 3272 Seneca St Apt 3

City State Zip Code  
Buffalo NY 14224-2796

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930052

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 761 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert D. Welchli		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 348 Provencal Rd		<b>Transaction ID:</b> FF060523.0930053	
City State Zip Code Grosse Pointe Farm MI 48236-2959	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mr Welchli Practice	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 702.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Donald M. K. Chang		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 255 S Maryland Pkwy		<b>Transaction ID:</b> FF060523.0930055	
City State Zip Code Las Vegas NV 89101-5343	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Hugh L. Hembree		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 10233		<b>Transaction ID:</b> FF060523.0930058	
City State Zip Code Fort Smith AR 72917-0233	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 762 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Miss Monte F. Richardson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 36 Lambeth Dr		<b>Transaction ID:</b> FF060523.0930066	
City Asheville	State NC	Zip Code 28803-3431	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 751.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Janice Lindberg		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1550 Mount Olivet Rd		<b>Transaction ID:</b> FF060523.0930067	
City Zirconia	State NC	Zip Code 28790-6788	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Donna M. Richter-Jones		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1414 Cottonville Dr		<b>Transaction ID:</b> FF060523.0930071	
City Friendship	State WI	Zip Code 53934-9227	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 763 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Tom A. Talesh

Mailing Address 10742 Debra Ave

City State Zip Code  
Granada Hills CA 91344-5225

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930074

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Else M. Grotjohn

Mailing Address 3311 Sparr Blvd

City State Zip Code  
Glendale CA 91208-1664

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 437.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930076

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas H. Root

Mailing Address 22149 Victory Blvd

City State Zip Code  
Woodland Hills CA 91303-2525

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060523.0930077

Amount of Each Receipt this Period  
70.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **185.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 764 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Timothy B. Horne

Mailing Address 116 Highland Dr

City State Zip Code  
Kosciusko MS 39090-3819

FEC ID number of contributing federal political committee. **C**

Name of Employer Canadian National Railroad Occupation Construction Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0930084

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Elroy J. Peters

Mailing Address 2261 Country Ln

City State Zip Code  
Columbia MO 65201-6333

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0930086

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. James L. Smith

Mailing Address 1700 Winslow Dr

City State Zip Code  
Little Rock AR 72207-6123

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060523.0930088

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 765 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard Smaltz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1485 Country Club Rd Apt 9		<b>Transaction ID:</b> FF060523.0930089
City State Zip Code Camden AR 71701-4563	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Lock Heed Martin	Occupation Mtls Eng	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael J. Perpich		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 4518 Bergenwood Ave		<b>Transaction ID:</b> FF060523.0940001
City State Zip Code North Bergen NJ 07047-2728	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Monte Cristo Records	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. George R. Hearst, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 5165 Estrella Rd		<b>Transaction ID:</b> FF060523.0940002
City State Zip Code Paso Robles CA 93446-8328	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 766 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. George S. Monkhouse		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 801 Torribrooke Ln		<b>Transaction ID:</b> FF060523.0940003	
City Athens State TX Zip Code 75751-2159	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 501.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Robert Pickens		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 8111 Preston Rd Ste 800		<b>Transaction ID:</b> FF060524.0010001	
City Dallas State TX Zip Code 75225-6316	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Investment	Aggregate Year-to-Date ▼ 10000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Kevin K. Choe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1085 Inverness Dr		<b>Transaction ID:</b> FF060524.0020001	
City La Canada State CA Zip Code 91011-3939	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 25000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	35150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 767 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Pearl Yeh		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 195 N 2nd Ave		<b>Transaction ID:</b> FF060524.0020002	
City Upland	State CA	Zip Code 91786-6019	Amount of Each Receipt this Period 12500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Natural Medicine International	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. John W. Galbraith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 500 Crestwood Dr Apt 1604		<b>Transaction ID:</b> FF060524.0030001	
City Charlottesville	State VA	Zip Code 22903-4861	Amount of Each Receipt this Period 3750.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Wayne Ryder		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 2 Gleneida Ave		<b>Transaction ID:</b> FF060524.0030002	
City Carmel	State NY	Zip Code 10512-1701	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	18750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 768 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Barrett Burke Wilson Castle Daffin & Frappier LLP		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 15000 Surveyor Blvd Ste 100		<b>Transaction ID:</b> FF060524.0050001
City Addison	State TX	Zip Code 75001-4417
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 5000.00
Name of Employer N/A	Occupation N/A	Memo: Partnership Gift
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael C. Barrett		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 15000 Surveyor Blvd Ste 100		<b>Transaction ID:</b> FF060524.0050001a
City Addison	State TX	Zip Code 75001-4417
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 5000.00
Name of Employer Barrett Burke Wilson Castle Daffin & F	Occupation Partner	<b>[MEMO ITEM]</b> Memo: Partnership Gift
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jeffrey P. Rhyan		Date of Receipt MM / DD / YYYY 05 / 22 / 2006
Mailing Address N7421 Country Club Dr		<b>Transaction ID:</b> FF060524.0060013
City Elkhorn	State WI	Zip Code 53121-2755
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 769 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gary D. Hoover

Mailing Address 18924 E Via Hermosa

City State Zip Code  
Rio Verde AZ 85263-8105

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0060033

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Edith B. Adams

Mailing Address 501 Moorpark Way Spc 46

City State Zip Code  
Mountain View CA 94041-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0080024

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Doris C. Turner

Mailing Address 404 Baker Dr

City State Zip Code  
Hurst TX 76054-3516

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0080051

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 770 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John Tucker, IV		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1020 Keyes Ave		<b>Transaction ID:</b> FF060524.0090037	
City State Zip Code Winter Park FL 32789-2504	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Tucker & Branham Inc.	Occupation Mortgage Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Mary E. Arthur		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 459 Peninsula Dr		<b>Transaction ID:</b> FF060524.0100001	
City State Zip Code Hot Springs AR 71901-8701	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Walter S. Rowland		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2501 Willard St		<b>Transaction ID:</b> FF060524.0100065	
City State Zip Code Wilmington DE 19806-1237	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 771 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John H. Caperton

Mailing Address 3112 Boxhill Ln

City State Zip Code  
Louisville KY 40222-6167

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0100088

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mat Dorangricchia

Mailing Address PO Box 18599

City State Zip Code  
Reno NV 89511-0599

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0110022

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Martha P. Giese

Mailing Address 20 Framingham Ln

City State Zip Code  
Pittsford NY 14534-1048

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1351.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0110090

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 772 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. E. R. Hostetter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 26		<b>Transaction ID: FF060524.0120005</b>	
City North East	State MD	Zip Code 21901-0026	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Kathryn Cheek</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 5001 Clonmel Rd		<b>Transaction ID: FF060524.0120046</b>	
City Nashville	State TN	Zip Code 37220-1501	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Ellen Pulos</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 7760 Ventura Canyon Ave		<b>Transaction ID: FF060524.0120062</b>	
City Panorama City	State CA	Zip Code 91402-6307	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	825.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 773 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jay F. Williams

Mailing Address 3308 Coletoville Rd

City State Zip Code  
Victoria TX 77905-3303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Invista Analyzer Tech

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0160061

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Allan C. Schinagle

Mailing Address 45 Bell St

City State Zip Code  
Chagrin Falls OH 44022-2904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Consulting Services Inc. Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0240001

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas W. Thompson

Mailing Address PO Box 606

City State Zip Code  
Peabody MA 01960-7606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0320006

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 774 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Theis

Mailing Address 400 Essex Dr

City State Zip Code  
Sierra Vista AZ 85635-4746

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0320014

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. N. Richard Huser

Mailing Address 2611 Windridge Ct

City State Zip Code  
Fort Wayne IN 46845-1921

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 506.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0320016

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Kathryn W. Tate

Mailing Address 50 Bryn Mawr Pl  
Unit 129

City State Zip Code  
Sumter SC 29150-4576

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0320026

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 525.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 775 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Howard E. Ellis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1808 E Warren Ave		<b>Transaction ID: FF060524.0330001</b>	
City State Zip Code Victoria TX 77901-4229	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Richard T. Knudson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 19244 SE River Drive Ct		<b>Transaction ID: FF060524.0350006</b>	
City State Zip Code Milwaukie OR 97267-6857	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Dorothy F. Casey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 247 Hummingbird Ln # 22B		<b>Transaction ID: FF060524.0360004</b>	
City State Zip Code Loganville GA 30052-3968	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 776 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Ruth M. Dufresne</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 5241 Utica St		<b>Transaction ID: FF060524.0360008</b>	
City State Zip Code Metairie LA 70006-6445	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Antonio Sosa</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 320 N Calhoun St		<b>Transaction ID: FF060524.0360010</b>	
City State Zip Code West Liberty IA 52776-1424	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer New York Dollar Store	Occupation Info Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Eugene A. Briggs</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 40		<b>Transaction ID: FF060524.0380004</b>	
City State Zip Code Guernsey WY 82214-0040	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer U. S. Treasury Dept.	Occupation Mechanic		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	430.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 777 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James R. Worley

Mailing Address 4037 Monroe St

City Toledo State OH Zip Code 43606-2143

FEC ID number of contributing federal political committee. **C**

Name of Employer Data Service Center Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060524.0380006

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Raj Vijaya

Mailing Address 12347 Palm St

City Cerritos State CA Zip Code 90703-1818

FEC ID number of contributing federal political committee. **C**

Name of Employer Parampech Technologies Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060524.0380012

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edwin H. Magruder, Jr.

Mailing Address 415 W Wall St Ste 1815

City Midland State TX Zip Code 79701-4442

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

**Transaction ID:** FF060524.0380022

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 778 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kamran Lalehpour

Mailing Address 117 W 9th St

City State Zip Code  
Los Angeles CA 90015-1509

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Insurance Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0380026

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Myron Gay

Mailing Address 446 Fairway Isles Dr

City State Zip Code  
Venice FL 34285-5659

FEC ID number of contributing federal political committee. **C**

Name of Employer Magnum Development Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0380028

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mike J. Miller

Mailing Address 2209 Pinewoods Cir

City State Zip Code  
Naples FL 34105-2541

FEC ID number of contributing federal political committee. **C**

Name of Employer Century 21 Occupation Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0380032

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 779 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bart Azzarelli, Jr.

Mailing Address 10328 Main St

City Thonotosassa State FL Zip Code 33592-8326

FEC ID number of contributing federal political committee. **C**

Name of Employer Dallas 1 Construction & Develop Inc Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0380035

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William Autrey

Mailing Address PO Box 715

City Ruston State LA Zip Code 71273-0715

FEC ID number of contributing federal political committee. **C**

Name of Employer Community Bridges, Inc. Occupation Administator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0380038

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ray W. Gibbs

Mailing Address PO Box 1650

City Brawley State CA Zip Code 92227-0938

FEC ID number of contributing federal political committee. **C**

Name of Employer Wayne Gibbs Hay & Cattle Company Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0380040

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 780 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Abdelbaset Youssef		Date of Receipt MM / DD / YYYY 05 / 22 / 2006
Mailing Address 388 Inkster Rd		<b>Transaction ID:</b> FF060524.0380047
City Inkster	State MI	Zip Code 48141-1209
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5200.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Ellen R. McKinnon		Date of Receipt MM / DD / YYYY 05 / 22 / 2006
Mailing Address 234 27th Ave S		<b>Transaction ID:</b> FF060524.0380052
City Grand Forks	State ND	Zip Code 58201-7536
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Jackie Dean		Date of Receipt MM / DD / YYYY 05 / 22 / 2006
Mailing Address 5372 Riverview Dr		<b>Transaction ID:</b> FF060524.0390002
City Saint Augustine	State FL	Zip Code 32080-7235
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 781 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles R. Boswell

Mailing Address 2215 Bauer Dr

City State Zip Code  
Houston TX 77080-5528

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Boswell Construction Company

Occupation  
INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2006

Transaction ID: FF060524.0390003

Amount of Each Receipt this Period  
225.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeff M. Rogge

Mailing Address 178 Alder Ave

City State Zip Code  
Omro WI 54963-2014

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Rogge's Sausage Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2006

Transaction ID: FF060524.0390004

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey V. Phelon

Mailing Address 165 Grier Rd

City State Zip Code  
Vernon CT 06066-6110

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Cna Insurance Co.

Occupation  
Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2006

Transaction ID: FF060524.0390009

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	575.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 782 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Sara A. Rueschhoff

Mailing Address 319 S Maize Rd

City State Zip Code  
Wichita KS 67209-1302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Westside Bookkeeping & In-cotax Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0390015

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Theodore K. Roche

Mailing Address 741 Arcturus Ave

City State Zip Code  
Oxnard CA 93033-9018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Divecon Services Lp President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0390020

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frank T. Skarren

Mailing Address 9 S Long Beach Rd

City State Zip Code  
Rockville Centre NY 11570-5621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NRF Funding Corp Broker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0390022

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 783 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. R. Clay Bailey

Mailing Address 4353 Hallbrook Dr

City Norcross State GA Zip Code 30092-1612

FEC ID number of contributing federal political committee. **C**

Name of Employer: Ryder Fms Occupation: Manager Training

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 05 / 22 / 2006

Transaction ID: FF060524.0390023

Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel F. McNeil

Mailing Address PO Box 824

City Cortland State NY Zip Code 13045-0824

FEC ID number of contributing federal political committee. **C**

Name of Employer: Mcneil Development Company Occupation: Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 05 / 22 / 2006

Transaction ID: FF060524.0390042

Amount of Each Receipt this Period: 255.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Paul Jones, Jr.

Mailing Address 305 Jean Lafitte Blvd

City Fernandina State FL Zip Code 32034-2258

FEC ID number of contributing federal political committee. **C**

Name of Employer: Retired Occupation: Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt: 05 / 22 / 2006

Transaction ID: FF060524.0390049

Amount of Each Receipt this Period: 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	455.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 784 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Mildred Riggs</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 4332 Teckla Blvd		<b>Transaction ID: FF060524.0390053</b>	
City State Zip Code Amarillo TX 79109-5422	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer R & R Quilts And More	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jeffrey V. Phelon</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 165 Grier Rd		<b>Transaction ID: FF060524.0390057</b>	
City State Zip Code Vernon CT 06066-6110	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cna Insurance Co.	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. David K. Robinson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 842 E Villa St Apt 219		<b>Transaction ID: FF060524.0390077</b>	
City State Zip Code Pasadena CA 91101-1281	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	275.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 785 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Leola Clark		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 701 10th St SE # 3448		<b>Transaction ID:</b> FF060524.0390078	
City Cedar Rapids	State IA	Zip Code 52403-1251	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Stephen F. Mullady		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1440 Willshire Ct		<b>Transaction ID:</b> FF060524.0390085	
City Cape Coral	State FL	Zip Code 33904-9724	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Joy V. Atkin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 500 E 62 S		<b>Transaction ID:</b> FF060524.0400026	
City Saint George	State UT	Zip Code 84770	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	51.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 786 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Frank Bannister

Mailing Address 610 Sundown Ln

City State Zip Code  
Evergreen CO 80439-9612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Western Oil & Gas Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060524.0400049

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Sydney T. Pollard, Jr.

Mailing Address 1735 Magnolia Ave

City State Zip Code  
Lady Lake FL 32159-2134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060524.0400059

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Mary A. Cinquina

Mailing Address 6850 Eiler Ln

City State Zip Code  
Cincinnati OH 45239-5617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cinquina Family Llc Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
3501.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** FF060524.0400063

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 787 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John S. Bishof, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 77 W Washington St Ste 1910		<b>Transaction ID:</b> FF060524.0400073	
City Chicago	State IL	Zip Code 60602-3176	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Law Office Of John Bishof	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Lloyd J. Shulman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 961 Route 52		<b>Transaction ID:</b> FF060524.0400078	
City Carmel	State NY	Zip Code 10512-4733	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Weinstein Enterprises Inc	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Pastor Joyce H. Darby		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 100 Valley St Lot 21		<b>Transaction ID:</b> FF060524.0410003	
City Lafayette	State LA	Zip Code 70507-5642	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Minister		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.72		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 788 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Frank Bannister		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 610 Sundown Ln		<b>Transaction ID:</b> FF060524.0500001	
City State Zip Code Evergreen CO 80439-9612	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Western Oil & Gas	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jerry S. Drabicki		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 593 N Seward Ave		<b>Transaction ID:</b> FF060524.0510002	
City State Zip Code Auburn NY 13021-2105	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Peter C. Kim		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 1058		<b>Transaction ID:</b> FF060524.0510004	
City State Zip Code Yorba Linda CA 92885-1058	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer S.k.m.	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 789 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Arthur E. Flegel

Mailing Address 1895 Oakdell Dr

City State Zip Code  
Menlo Park CA 94025-6167

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0510005

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter C. Kim

Mailing Address PO Box 1058

City State Zip Code  
Yorba Linda CA 92885-1058

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Skm Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
4500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0510007

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peter C. Kim

Mailing Address PO Box 1058

City State Zip Code  
Yorba Linda CA 92885-1058

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
S.k.m. Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0510008

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 790 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold R. Burnstein

Mailing Address 510 Ravine Dr

City State Zip Code  
Highland Park IL 60035-3551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Schwartz & Freeman Lawyer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0520002

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Douglas B. Sagar

Mailing Address 85 Hudson Rd

City State Zip Code  
Stow MA 01775-1216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hydro-test Products, Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0520007

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James W. Newberne

Mailing Address 8580 Cavalier Dr

City State Zip Code  
Cincinnati OH 45231-5037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0520013

Amount of Each Receipt this Period  
400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 791 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Timothy G. Moriarty

Mailing Address 2195 Jenks Ave  
Ste C

City Panama City State FL Zip Code 32405-4551

FEC ID number of contributing federal political committee. **C**

Name of Employer Emerald Isle Pulmonary Me-  
dicin Occupation Doctor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0520019

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Erik A. Janeczko

Mailing Address 4709 Woods Xing

City Jefferson City State MO Zip Code 65109-6222

FEC ID number of contributing federal political committee. **C**

Name of Employer Power Training Llc Occupation Trainer/professional Speaker

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0520022

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James M. Erickson

Mailing Address PO Box 25907

City Fayetteville State NC Zip Code 28314-5015

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0520024

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 792 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Eleanore H. Gilbertson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 1543		<b>Transaction ID:</b> FF060524.0520028	
City Minden	State NV	Zip Code 89423-1543	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Anthony J. Werderitsch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6371 Saline Ann Arbor Rd		<b>Transaction ID:</b> FF060524.0520030	
City Saline	State MI	Zip Code 48176-8806	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Administrative Controls	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Louis R. Siracusa, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 61867		<b>Transaction ID:</b> FF060524.0520031	
City Honolulu	State HI	Zip Code 96839-1867	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Phoenix Security Hawaii	Occupation President/C.E.O.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	825.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 793 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold L. Sparks

Mailing Address 4600 S Ocean Blvd  
Apt 904

City Highland Beach State FL Zip Code 33487-5390

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0520033

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gordon Bellis, Jr.

Mailing Address 2109 Broadway St

City San Francisco State CA Zip Code 94115-1328

FEC ID number of contributing federal political committee. **C**

Name of Employer Bank Of America Occupation Banking

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0530005

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frank Bannister

Mailing Address 610 Sundown Ln

City Evergreen State CO Zip Code 80439-9612

FEC ID number of contributing federal political committee. **C**

Name of Employer Western Oil & Gas Development Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: FF060524.0530007

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 794 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Raymond E. Harper

Mailing Address 6007 Financial Plz  
Ste 215

City State Zip Code  
Shreveport LA 71129-2675

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0530009

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Wilfred R. Fortin

Mailing Address 2211 S Florida Ave

City State Zip Code  
Lakeland FL 33803-7226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Play It Again Sports Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0530013

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas E. Nowakowski, Sr.

Mailing Address 7 Chestnut Ln

City State Zip Code  
New Hope PA 18938-9206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
United Mrk.services Inc. Sales Management

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0530014

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 795 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John H. Fitz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6 Lisa Ln		Transaction ID: FF060524.0540002	
City Willington	State CT	Amount of Each Receipt this Period 50.00	
Zip Code 06279-2242		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Raytheon Company	Occupation Engineer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 201.00			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John R. Ellis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 100 Peabody Pl Ste 1400		Transaction ID: FF060524.0600003	
City Memphis	State TN	Amount of Each Receipt this Period 250.00	
Zip Code 38103-3648		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BELZ Ent.	Occupation Real Estate Developer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Warren W. Spikes		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 759		Transaction ID: FF060524.0630002	
City Hugoton	State KS	Amount of Each Receipt this Period 100.00	
Zip Code 67951-0759		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 275.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 796 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Emil L. Rath		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1449 F PO Box 229		<b>Transaction ID:</b> FF060524.0630004	
City Pawnee City	State NE	Zip Code 68420-0229	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Wilbur Bruxvoort		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 13474 Highway F48 W		<b>Transaction ID:</b> FF060524.0630005	
City Mitchellville	State IA	Zip Code 50169-8568	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Stephen N. Avery		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 337 Del Mar Ave		<b>Transaction ID:</b> FF060524.0630009	
City Chula Vista	State CA	Zip Code 91910-3908	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Playwright, Actor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 797 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steven Craig Simmerman

Mailing Address 1707 Kirby Pkwy  
Ste 100

City State Zip Code  
Memphis TN 38120-4367

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kirby Office Park Condos Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0630011

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Sergio M. Chavez

Mailing Address 1060 W Frankford Rd

City State Zip Code  
Carrollton TX 75007-4999

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Eagle Park Tae Kwon Do Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0630012

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joanne Kim Phan

Mailing Address 3773 University Dr  
Apt 207

City State Zip Code  
Irvine CA 92612-4668

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1793.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0630014

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 950.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 798 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. James L. Barton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 2903 State Road 25 N		<b>Transaction ID:</b> FF060524.0630017
City State Zip Code Lafayette IN 47905-7891	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Irving Materials	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. David W. Larkin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 12101 31st Ct N		<b>Transaction ID:</b> FF060524.0630018
City State Zip Code Saint Petersburg FL 33716-1831	Amount of Each Receipt this Period 550.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Kent Perkins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 3121 St Albans Path Ste. 438		<b>Transaction ID:</b> FF060524.0630019
City State Zip Code Southlake TX 76092-4305	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 799 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Timothy L. Dunn

Mailing Address 683 Mirandy PI

City Reynoldsburg State OH Zip Code 43068-1602

FEC ID number of contributing federal political committee. **C**

Name of Employer T & D Tree Farms LLC Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0630020

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph Gallo, Jr.

Mailing Address 41 Round Hill Rd

City Kinnelon State NJ Zip Code 07405-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0630022

Amount of Each Receipt this Period  
 15.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Benny Lau

Mailing Address 84 Bowery

City New York State NY Zip Code 10013-4608

FEC ID number of contributing federal political committee. **C**

Name of Employer Eternity Fine Jewelry Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0630023

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	765.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 800 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Capt. E. W. Behm

Mailing Address 661 Balboa Ave

City State Zip Code  
Coronado CA 92118-2023

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060524.0630024

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Earl G. Duha

Mailing Address 24108 State Highway 27

City State Zip Code  
Eastman WI 54626-8771

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060524.0630025

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Eugene Choate

Mailing Address 821 Stone Edge Ct

City State Zip Code  
Marietta GA 30068-2564

FEC ID number of contributing federal political committee. **C**

Name of Employer Bankers Fidelity Life Ins. Co. Occupation Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060524.0630026

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **575.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 801 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Patricia A. Gallucci</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2567 Westridge Rd		<b>Transaction ID: FF060524.0630028</b>	
City State Zip Code Los Angeles CA 90049-1232	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ronald D. Grant</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 861 Woodside Trails Dr		<b>Transaction ID: FF060524.0630029</b>	
City State Zip Code Ballwin MO 63021-6193	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1051.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Kenneth L. Horne</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 108 Troup Hwy		<b>Transaction ID: FF060524.0630032</b>	
City State Zip Code Tyler TX 75701-4250	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Interior Designer Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 802 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ernest C. Martelli, III

Mailing Address 4 Louise Dr

City Warminster State PA Zip Code 18974-1526

FEC ID number of contributing federal political committee. **C**

Name of Employer Martelli's Metal Fabricat-  
ion Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0630033

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mike S. Julovich

Mailing Address 7098 Broadway

City Merrillville State IN Zip Code 46410-3538

FEC ID number of contributing federal political committee. **C**

Name of Employer Merrillville Terrace Apt. Occupation Mngr.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0640002

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frederick W. Parsons, III

Mailing Address 498 Albemarle Rd  
Unit 101

City Charleston State SC Zip Code 29407-7570

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: FF060524.0640004

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 275.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 803 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. J. D. Corwin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 133 21st Ave N		<b>Transaction ID:</b> FF060524.0640005	
City State Zip Code Texas City TX 77590-6008	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 701.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Ada A. Strassenburgh		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 608		<b>Transaction ID:</b> FF060524.0640006	
City State Zip Code Ocean View NJ 08230-0608	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1015.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Morton D. Dubin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 63 W 83rd St		<b>Transaction ID:</b> FF060524.0640007	
City State Zip Code New York NY 10024-5238	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 804 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Frank P. Wetherbee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address PO Box 3650		<b>Transaction ID:</b> FF060524.0640010
City Albany State GA Zip Code 31706-3650	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Frank Wetherbee Occupation Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael H. Brandt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 6837 Creston Rd		<b>Transaction ID:</b> FF060524.0650001
City Edina State MN Zip Code 55435-1638	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Brandt Engineering & Surveying Occupation Vice Pres.	Aggregate Year-to-Date ▼ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James R. Green		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 4109 Belmont Blvd		<b>Transaction ID:</b> FF060524.0670001
City Nashville State TN Zip Code 37215-3000	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Occupation Technical Consultant	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 805 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jeff Jones		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 602 Highway 16 E		<b>Transaction ID:</b> FF060524.0670002	
City State Zip Code Carthage MS 39051-4212	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Carthage Discount Drugs	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Samuel Slater		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address PO Box 202		<b>Transaction ID:</b> FF060524.0670004	
City State Zip Code Unionville PA 19375-0202	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Jon E. Peat		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 9828 Ravari Dr		<b>Transaction ID:</b> FF060524.0680046	
City State Zip Code Cypress CA 90630-3553	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Raytheon	Occupation Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 806 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. David M. Riley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address <b>PO Box 834</b>		<b>Transaction ID: FF060524.0680061</b>	
City <b>Hearne</b>	State <b>TX</b>	Zip Code <b>77859-0834</b>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wellsco,inc.	Occupation It Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Rev. Joseph E. Nichols</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address <b>810 Walnut St</b>		<b>Transaction ID: FF060524.0740062</b>	
City <b>Lebanon</b>	State <b>PA</b>	Zip Code <b>17042-6058</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Paul H. Hitch</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address <b>PO Box 1308</b>		<b>Transaction ID: FF060524.0740069</b>	
City <b>Guymon</b>	State <b>OK</b>	Zip Code <b>73942-1308</b>	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hitch Enterprises, Inc.	Occupation Agriculture		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 807 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Nelson J. Darling, Jr.

Mailing Address 74 Beach Bluff Ave

City State Zip Code  
Swampscott MA 01907-1534

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0750005

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Geraldine Hanger

Mailing Address 5038 S Barley Ct

City State Zip Code  
Gilbert AZ 85297-8633

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0750057

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William R. Anderson

Mailing Address 402 67th Ave N

City State Zip Code  
Myrtle Beach SC 29572-3355

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0750067

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 808 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Miss Jane B. Folkrod

Mailing Address 1050 E Pine St  
Apt 301

City State Zip Code  
Silver City NM 88061-7174

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5150.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0760080

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Miss Rebecca M. Scowden

Mailing Address 1508 Doran Dr

City State Zip Code  
Odessa TX 79761-1523

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0770025

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald E. Wallin

Mailing Address 5260 Ashlar Dr

City State Zip Code  
Bloomington MN 55437-3365

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0770041

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	130.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 809 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Jean B. Masters

Mailing Address 1150 Oak Knoll Dr

City State Zip Code  
Lake Forest IL 60045-3648

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 611.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0770064

Amount of Each Receipt this Period  
360.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. William Buffaloe

Mailing Address 5525 Wake Academy Dr

City State Zip Code  
Raleigh NC 27603-4119

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 527.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0770084

Amount of Each Receipt this Period  
26.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edward A. Fleckenstein

Mailing Address 39 King Ave

City State Zip Code  
Weehawken NJ 07086-6906

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0790008

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>486.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 810 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard Seaver		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 538 S Flower St		<b>Transaction ID:</b> FF060524.0800061	
City State Zip Code Los Angeles CA 90071-2501	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hydril Co.	Occupation Corporate Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Lawrence I. Frawley, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 516 Woodhill		<b>Transaction ID:</b> FF060524.0810009	
City State Zip Code Newark NY 14513-2050	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None	Occupation Assembly		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Melvin A. Moe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 1102 S 114th St Lot 61		<b>Transaction ID:</b> FF060524.0810092	
City State Zip Code Mesa AZ 85208-7933	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 381.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	775.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 811 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Eugene B. Canfield</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address PO Box 2200		<b>Transaction ID: FF060524.0820031</b>	
City Jamestown	State NY	Amount of Each Receipt this Period 50.00	
Zip Code 14702-2200			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. L. William Crotty</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address PO Box 442		<b>Transaction ID: FF060524.0820060</b>	
City Dayton	State OH	Amount of Each Receipt this Period 250.00	
Zip Code 45401-0442			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Joan H. Madeira</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 481 Lower Hollow Rd		<b>Transaction ID: FF060524.0840021</b>	
City Dorset	State VT	Amount of Each Receipt this Period 500.00	
Zip Code 05251-9787			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 812 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Dale L. Waters</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 9191 Folsom Blvd Ste 1		<b>Transaction ID: FF060524.0850069</b>	
City Sacramento      State CA      Zip Code 95826-2407	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Benefit Ins. Services	Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Geraldine Cross</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 12 S Boulevard		<b>Transaction ID: FF060524.0860004</b>	
City West Springfield      State MA      Zip Code 01089-3210	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Don Plaster</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 4638 E Thomas Ave		<b>Transaction ID: FF060524.0860012</b>	
City Fresno      State CA      Zip Code 93702-1618	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Skees Recycling	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 813 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Ms. Susan Hall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 35 W 6th St PO Box 670		Transaction ID: FF060524.0860021	
City Dunkirk      State NY      Zip Code 14048-0670	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Mr. Joe Poppenheimer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 851 Green T Lake W		Transaction ID: FF060524.0860022	
City Hernando      State MS      Zip Code 38632-4555	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Mr. Truett W. Flacher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 702 E Grace St		Transaction ID: FF060524.0900014	
City Brownfield      State TX      Zip Code 79316-3559	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	610.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 814 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John W. Spotswood

Mailing Address 6404 Maryknoll Dr

City State Zip Code  
Mobile AL 36695-3830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Merrill Lynch Stock Broker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0900026

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard T. McKernan

Mailing Address 13507 NW Wax Myrtle Trl

City State Zip Code  
Palm City FL 34990-4828

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Agencourt INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0910022

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Son Thanh Vo

Mailing Address 1715 North Ct

City State Zip Code  
Eustis FL 32726-7934

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kobe Japanese Steak House Restaurant Bartender & Cashier

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 226.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0910027

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 815 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jeffrey V. Phelon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 165 Grier Rd		Transaction ID: FF060524.0910043	
City State Zip Code Vernon CT 06066-6110	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cna Insurance Co.	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Vicente R. Limcaoco		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 439 Loucroft Rd		Transaction ID: FF060524.0910044	
City State Zip Code Haddonfield NJ 08033-4026	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Jane E. Mc Donald		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 240 Lake St		Transaction ID: FF060524.0910046	
City State Zip Code Newburgh NY 12550-6201	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 816 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Durga Das Agrawal

Mailing Address 2921 University Blvd  
PO Box 34506

City Houston State TX Zip Code 77234-4506

FEC ID number of contributing federal political committee. **C**

Name of Employer Piping Technology & Products, Inc. Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0910082

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joe C. Brumit, II

Mailing Address 234 Skycliff Dr

City Asheville State NC Zip Code 28804-8101

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0910088

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard J. Felter

Mailing Address 2626 Indian Hill Rd

City Cedar Rapids State IA Zip Code 52403-1530

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0910090

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	875.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 817 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Philip A. McDonald

Mailing Address 2120 Markham Way

City State Zip Code  
Sacramento CA 95818-3140

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 212.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060524.0920004

Amount of Each Receipt this Period  
31.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Jean C. Walker

Mailing Address 411 N Middletown Rd

City State Zip Code  
Media PA 19063-4422

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 951.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060524.0920006

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John R. Keane

Mailing Address 33 Ellsworth Ave

City State Zip Code  
Staten Island NY 10312-2501

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 427.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060524.0920037

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>231.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 818 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Paul Coulon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 600 E Flournoy Lucas Rd Apt K7		<b>Transaction ID:</b> FF060524.0920040
City State Zip Code Shreveport LA 71115-3841	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. William Moller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 965		<b>Transaction ID:</b> FF060524.0920041
City State Zip Code Cutchoque NY 11935-0965	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Patti J. Allison		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 6910 Larkvale Dr		<b>Transaction ID:</b> FF060524.0920046
City State Zip Code Rancho Palos Verde CA 90275-2941	Amount of Each Receipt this Period 1030.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5020.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1305.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 819 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Linda Lee Shimmin

Mailing Address PO Box 697

City State Zip Code  
Vernal UT 84078-0697

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0920059

Amount of Each Receipt this Period  
70.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Harold Hestnes

Mailing Address 2 Sudbury Rd

City State Zip Code  
Weston MA 02493-1333

FEC ID number of contributing federal political committee. **C**

Name of Employer Wilmercutlerpickeringhale-anddoor Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0920062

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Margaret M. Moloney

Mailing Address 777 Royal Saint George Dr

City State Zip Code  
Naperville IL 60563-2986

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060524.0920070

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **345.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 820 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Kevin Cochran		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 1110 E Chapman Ave Ste 203		<b>Transaction ID:</b> FF060524.0920083
City State Zip Code Orange CA 92866-2139	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Occupation Business Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Roger Wahldick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 5510 River Bluff Dr		<b>Transaction ID:</b> FF060524.0930012
City State Zip Code Minneapolis MN 55437-3611	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED Occupation INFO REQUESTED	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Maynard Selsvold		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 227 N 6th St		<b>Transaction ID:</b> FF060524.0930015
City State Zip Code Mankato MN 56001-4446	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 821 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Emily F. Duda

Mailing Address 1233 Lightered Knot Creek Trl

City State Zip Code  
Oviedo FL 32765-8584

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060524.0930021

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Harold W. Kraft

Mailing Address 1908 Bona Bella Ave

City State Zip Code  
Savannah GA 31406-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060524.0930024

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert B. Jacobson

Mailing Address PO Box 5839

City State Zip Code  
Blue Jay CA 92317-5839

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
R. B. Jacobson, Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060524.0930025

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 822 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Victoria E. Miele</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 157 Foreside Rd		<b>Transaction ID: FF060524.0940011</b>	
City Falmouth	State ME	Zip Code 04105-1723	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Elbert C. Smith</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address PO Box 856		<b>Transaction ID: FF060524.0940012</b>	
City Renton	State WA	Zip Code 98057-0856	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2291.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard Gebhardt</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 400 W Pinto Dr		<b>Transaction ID: FF060524.0940046</b>	
City Edelstein	State IL	Zip Code 61526-9210	Amount of Each Receipt this Period 1001.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1203.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 823 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Lonnie Craft		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 2221 Durban Point Dr		<b>Transaction ID:</b> FF060524.0990001	
City State Zip Code Soddy Daisy TN 37379-3190	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Owner	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Lillian Martin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 5405 Bacon Rd		<b>Transaction ID:</b> FF060524.0990017	
City State Zip Code Oakland CA 94619-3103	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Calvin T. Wells, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6500 Sharon Hills Rd		<b>Transaction ID:</b> FF060525.0120001	
City State Zip Code Charlotte NC 28210-7047	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 824 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Loyd D. Lubinski

Mailing Address 5610 Norwich Pkwy  
Apt 410

City Stillwater State MN Zip Code 55082-6491

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060525.0230002

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James M. Henderson, Jr.

Mailing Address 1315 Brockie Dr

City York State PA Zip Code 17403-4449

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060525.0240004

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Sandra Scaffett Johnson

Mailing Address 25 S Oklahoma Ave  
Ste 300

City Oklahoma City State OK Zip Code 73104-2422

FEC ID number of contributing federal political committee. **C**

Name of Employer Anauties Inc. Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060525.0290002

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	475.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 825 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Kerry A. Douglas

Mailing Address 705 Queens Ct

City State Zip Code  
Bedford TX 76021-5308

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060525.0410002

Amount of Each Receipt this Period  
60.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard A. Jones

Mailing Address 9119 Metric Blvd

City State Zip Code  
Austin TX 78758-5992

FEC ID number of contributing federal political committee. **C**

Name of Employer Amtec Medical Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060525.0420003

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Martha E. Lang

Mailing Address 11100 Elm St  
3615 E Imperial Hwy

City State Zip Code  
Lynwood CA 90262-2906

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Nursing Home Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060525.0540004

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 560.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 826 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Hon. William S. Conover		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 405 Kingsberry Cir		<b>Transaction ID:</b> FF060525.0540006	
City State Zip Code Pittsburgh PA 15234-1065	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Martha E. Lang		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 11100 Elm St 3615 E Imperial Hwy		<b>Transaction ID:</b> FF060525.0540018	
City State Zip Code Lynwood CA 90262-2906	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Nursing Home Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Marvin Landon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 5395 Jed Smith Rd		<b>Transaction ID:</b> FF060525.0540022	
City State Zip Code Hidden Hills CA 91302-1109	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fosi Logistics	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 827 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Emil H. Pawlik

Mailing Address 11 Avery Cir

City State Zip Code  
Jackson MS 39211-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer Refused To Give Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060525.0540026

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John C. Lewis

Mailing Address 6335 W Northwest Hwy  
Apt 812

City State Zip Code  
Dallas TX 75225-3544

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060525.0540036

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Eugene Choate

Mailing Address 821 Stone Edge Ct

City State Zip Code  
Marietta GA 30068-2564

FEC ID number of contributing federal political committee. **C**

Name of Employer Bankers Fidelity Life Ins. Co. Occupation  
Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060525.0550003

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 828 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Julian L. Dawson, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 2542 E 56th PI		<b>Transaction ID: FF060525.0620032</b>	
City State Zip Code Tulsa OK 74105-7510	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Joan L. O'Donnell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 820 Steele Dr		<b>Transaction ID: FF060525.0620047</b>	
City State Zip Code Brea CA 92821-2227	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 606.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Rulon T. Stephenson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 102 Karen St		<b>Transaction ID: FF060525.0620083</b>	
City State Zip Code Leesville LA 71446-3724	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 591.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 829 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Alice B. Simonson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address PO Box 512		<b>Transaction ID:</b> FF060525.0670045	
City Watford City	State ND	Amount of Each Receipt this Period 75.00	
Zip Code 58854-0512		Transaction ID: FF060525.0670045	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 75.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	Amount of Each Receipt this Period 75.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Virginia L. Kathary		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1397 King Sago Ct		<b>Transaction ID:</b> FF060525.0690009	
City Naples	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 34119-3345		Transaction ID: FF060525.0690009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	Amount of Each Receipt this Period 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard L. Conkling		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 11765 Fairhaven Dr		<b>Transaction ID:</b> FF060525.0760022	
City Baton Rouge	State LA	Amount of Each Receipt this Period 500.00	
Zip Code 70815-6214		Transaction ID: FF060525.0760022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	Amount of Each Receipt this Period 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1075.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1075.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 830 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Joseph M. Amico</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 81 Ralph Rd		<b>Transaction ID: FF060525.0760028</b>	
City State Zip Code New Rochelle NY 10804-1524	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Mary E. Hadder</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1641 NW 5th St		<b>Transaction ID: FF060525.0770001</b>	
City State Zip Code Boynton Beach FL 33435-2626	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Hazel F. Self</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 208 Grandview Blvd		<b>Transaction ID: FF060525.0780001</b>	
City State Zip Code Muskogee OK 74403-8609	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	385.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 831 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. June Stutzman

Mailing Address 100 McNamee Ln  
Apt 204

City State Zip Code  
Rising Sun MD 21911-2261

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

**Transaction ID:** FF060525.0780006

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Stratton Sclavos

Mailing Address PO Box 10195

City State Zip Code  
Palo Alto CA 94303-0995

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Verisign CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

**Transaction ID:** FF060526.0010001

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert A. Peiser

Mailing Address 2219 Madewood Dr

City State Zip Code  
Missouri City TX 77459-2779

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

**Transaction ID:** FF060526.0010002

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7535.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 832 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Anne M. Harper</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 85 Scottsdale Dr		<b>Transaction ID: FF060526.0010003</b>	
City State Zip Code Troy MI 48084-1716	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7575.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Harold T. Leach, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 20 Deer Creek Ln		<b>Transaction ID: FF060526.0010004</b>	
City State Zip Code Danville CA 94506-6054	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer D C S Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Jon D. Shaver</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 46 Meritage Cmn No. 106		<b>Transaction ID: FF060526.0010005</b>	
City State Zip Code Livermore CA 94551-7589	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 833 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James Michael Trautner

Mailing Address 3716 Deer Trail Ct

City State Zip Code  
Danville CA 94506-6025

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060526.0010006

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Tom Rosen

Mailing Address 105 Cedar Bluff Dr

City State Zip Code  
Fairmont MN 56031-1739

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060526.0010007

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Carl W. Kuehne

Mailing Address 4479 Heritage Hts

City State Zip Code  
De Pere WI 54115-9254

FEC ID number of contributing federal political committee. **C**

Name of Employer American Foods Group Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060526.0010008

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 834 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Arthur S. Agatston

Mailing Address 4302 Alton Rd  
Sunset Island li

City State Zip Code  
Miami Beach FL 33140-2891

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Arthur Agatston MD Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

**Transaction ID:** FF060526.0010009

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Sari K. Agatston

Mailing Address 2549 Sunset Dr  
Sunset Island II

City State Zip Code  
Miami Beach FL 33140-4240

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Offices of South Beach Di- get Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

**Transaction ID:** FF060526.0010010

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John E. Matuska

Mailing Address 3663 S Miami Ave

City State Zip Code  
Miami FL 33133-4253

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mercy Hospital CEO/President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

**Transaction ID:** FF060526.0010011

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **10500.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 835 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Richard F. Gill		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 7 Stones Throw		<b>Transaction ID:</b> FF060526.0010012
City State Zip Code Baton Rouge LA 70809	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. James J. Kopel, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 3804 Hanover St		<b>Transaction ID:</b> FF060526.0010013
City State Zip Code Dallas TX 75225-7116	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Tim Eller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 6556 Ivyglen Dr		<b>Transaction ID:</b> FF060526.0010014
City State Zip Code Dallas TX 75254-7940	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 836 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Nijad I. Fares		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 130688		<b>Transaction ID:</b> FF060526.0010015	
City Houston	State TX	Zip Code 77219-0688	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Wedge Services Corp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William Morse Davidson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2300 Harmon Rd		<b>Transaction ID:</b> FF060526.0010016	
City Auburn Hills	State MI	Zip Code 48326-1714	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Guardian Industries	Occupation President & Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Brian J. Woram		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 3821 Colgate Ave		<b>Transaction ID:</b> FF060526.0010017	
City Dallas	State TX	Zip Code 75225-5224	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	9000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 838 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Madison F. Grose

Mailing Address 715 Lake Ave

City State Zip Code  
Greenwich CT 06830-3333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Starwood Capital Group Senior Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060526.0010021

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William R. Council, III

Mailing Address 5161 Ravens Gln

City State Zip Code  
Nashville TN 37211-8577

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Advocat. Inc. President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060526.0010022

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. N. Randy Uzzell

Mailing Address 144 Bay View Blvd

City State Zip Code  
Atlantic Beach NC 28512-5500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Brithaven President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: FF060526.0010023

Amount of Each Receipt this Period  
750.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 839 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Peter J. Licari		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 780 Lewis Ln		<b>Transaction ID:</b> FF060526.0010024	
City <b>Ambler</b>	State <b>PA</b>	Zip Code <b>19002-5144</b>	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. J. Norman Estes		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 11142 Telmar Dr		<b>Transaction ID:</b> FF060526.0010025	
City <b>Northport</b>	State <b>AL</b>	Zip Code <b>35475-2830</b>	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer NHS Mgmt., LLC		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Billy Lee Evans		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 431 1st St SE		<b>Transaction ID:</b> FF060526.0010026	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003-1827</b>	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 840 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michel J. Orradre

Mailing Address 67100 Sargeant Canyon Rd

City San Ardo State CA Zip Code 93450-8901

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: FF060526.0200009

Amount of Each Receipt this Period  
565.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David C. Molta

Mailing Address 7037 Crane Ct

City Carlsbad State CA Zip Code 92011-4012

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Mohesives Occupation Chemist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: FF060526.0210066

Amount of Each Receipt this Period  
155.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James R. Hutton

Mailing Address 823 Old Lake Rd

City Houston State TX Zip Code 77057-1103

FEC ID number of contributing federal political committee. **C**

Name of Employer C B C O Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: FF060526.0220013

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	745.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 841 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Kathrine Umpleby

Mailing Address 5971 Germaine Ln

City State Zip Code  
La Jolla CA 92037-7401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nextwave Broadband Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: FF060526.0230002

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Burton Chubeck

Mailing Address 5363 S Butterfield Way

City State Zip Code  
Greenfield WI 53221-3249

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: FF060526.0230040

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Frances K. Head

Mailing Address 680 Applewood Dr

City State Zip Code  
Saint Louis MO 63122-2533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: FF060526.0240044

Amount of Each Receipt this Period  
35.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>385.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 842 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Jean N. Spaulding

Mailing Address 2700 Sycamore Canyon Rd

City State Zip Code  
Santa Barbara CA 93108-1916

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: FF060526.0240059

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Geraldine Griffin

Mailing Address 7707 N Middlebelt Rd

City State Zip Code  
Westland MI 48185-2564

FEC ID number of contributing federal political committee. **C**

Name of Employer Lj Griffin Funeral Home Occupation Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: FF060526.0270011

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Rev. Wolfgang K. Teklenburg

Mailing Address 7798 Northwood Rd NW

City State Zip Code  
Solway MN 56678-4589

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Minister

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: FF060526.0290010

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>575.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 843 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Paul Dunlop		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 5055 Blue Gum Ave		<b>Transaction ID:</b> FF060526.0290071	
City State Zip Code Modesto CA 95358-8528	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Harold J. Shaffer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 3667 Scadlock Ln		<b>Transaction ID:</b> FF060526.0300002	
City State Zip Code Sherman Oaks CA 91403-4319	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John A. Conti		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 5317 Bellview Ave		<b>Transaction ID:</b> FF060526.0320022	
City State Zip Code Pensacola FL 32526-1009	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Conti Construction Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 844 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Lois L. Soto		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 28016 Lobrook Dr		<b>Transaction ID:</b> FF060526.0320038	
City State Zip Code Rancho Palos Verde CA 90275-3132	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Long Beach BMW	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles J. Turner, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 900 N Island Dr NW		<b>Transaction ID:</b> FF060526.0320047	
City State Zip Code Atlanta GA 30327-4624	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 386.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Jamie M. Thorne		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 28224 Brokenmead Path		<b>Transaction ID:</b> FF060526.0320049	
City State Zip Code Wesley Chapel FL 33543-5709	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Noten Enterprises	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	285.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 845 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Jack Kramer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 231 Glenroy Pl		<b>Transaction ID:</b> FF060526.0340001	
City Los Angeles	State CA	Zip Code 90049-2419	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Golf Course Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. William Kucharski</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 19179 Blanco Rd Ste 105 # 802		<b>Transaction ID:</b> FF060526.0400053	
City San Antonio	State TX	Zip Code 78258-4009	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Ecology & Environment Inc.	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Louise Dawson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 134 Stuart Dr		<b>Transaction ID:</b> FF060526.0410002	
City Winchester	State VA	Zip Code 22602-5115	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 846 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John P. Desmond		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 19380 Collins Ave Apt 1403		<b>Transaction ID:</b> FF060526.0410004
City Sunny Isles Beach	State FL Zip Code 33160-2286	
Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Galardi South Entertainment	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID:</b> FF060526.0410016
City Pasadena	State CA Zip Code 91106-3252	
Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID:</b> FF060526.0410018
City Pasadena	State CA Zip Code 91106-3252	
Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	160.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 847 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Tomislav Iricanin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 3724 Lorings Rd		<b>Transaction ID:</b> FF060526.0410019	
City State Zip Code Norman OK 73072-0214	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 901.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Sabino Farinaccia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 852 59th St		<b>Transaction ID:</b> FF060526.0410022	
City State Zip Code Brooklyn NY 11220-3612	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William E. Guy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 990 E Del Mar Blvd # 203		<b>Transaction ID:</b> FF060526.0410028	
City State Zip Code Pasadena CA 91106-3252	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2157.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	355.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 848 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert C. Coats

Mailing Address 4211 Garibaldi Ave

City State Zip Code  
Jacksonville FL 32210-8513

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      285.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

**Transaction ID:** FF060526.0410030

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael P. Vinlove

Mailing Address PO Box 103

City State Zip Code  
Chazy NY 12921-0103

FEC ID number of contributing federal political committee. **C**

Name of Employer Wreth Research      Occupation Scientist

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

**Transaction ID:** FF060526.0420050

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Emry Crawford

Mailing Address 28344 Prospect Ave

City State Zip Code  
Wasco CA 93280-7625

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

**Transaction ID:** FF060526.0420052

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **385.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 849 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joe G. Street

Mailing Address RR 2 Box 644

City Vansant State VA Zip Code 24656-9427

FEC ID number of contributing federal political committee. **C**

Name of Employer Royal Machine Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060526.0420055

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Margaret L. Haven

Mailing Address 40 La Jolla Cir

City Montgomery State TX Zip Code 77356-5336

FEC ID number of contributing federal political committee. **C**

Name of Employer Havens Landing Rv Resort Occupation Self Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060526.0430004

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Delhis Mary Wolf

Mailing Address 1440 S Ocean Blvd Apt 11A

City Pompano Beach State FL Zip Code 33062-7372

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060526.0430048

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 850 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Patricia Weeden</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address <b>620 Sand Hill Rd Apt 203F</b>		<b>Transaction ID: FF060526.0430050</b>	
City <b>Palo Alto</b>	State <b>CA</b>	Amount of Each Receipt this Period 30.00	
Zip Code <b>94304-2616</b>		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer <b>INFO REQUESTED</b>		Occupation <b>INFO REQUESTED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Barbara J. Bettis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address <b>1217 Highland Ave W</b>		<b>Transaction ID: FF060526.0430069</b>	
City <b>Salem</b>	State <b>OH</b>	Amount of Each Receipt this Period 50.00	
Zip Code <b>44460-1313</b>		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer <b>Retired</b>		Occupation <b>Retired</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Dan E. Hennessey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address <b>1705 Moxahala Ave 1705 Moxahala Ave</b>		<b>Transaction ID: FF060526.0440004</b>	
City <b>Zanesville</b>	State <b>OH</b>	Amount of Each Receipt this Period 30.00	
Zip Code <b>43701-5952</b>		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer <b>P &amp; D Transportation Inc.</b>		Occupation <b>Vice President</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1031.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	110.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 851 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. James P. Peabody		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 1535 Punahou St Apt 804		<b>Transaction ID:</b> FF060526.0450012
City Honolulu State HI Zip Code 96822-4601	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 276.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Edward I. Weisiger		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 9000 Statesville Rd		<b>Transaction ID:</b> FF060526.0450015
City Charlotte State NC Zip Code 28269-7680	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Carolina Tractor Occupation Chairman	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joseph T. Charles, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 5600 Apollo Dr		<b>Transaction ID:</b> FF060526.0450022
City Rolling Mdws State IL Zip Code 60008-4019	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Charles Industries Occupation President	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 852 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jeffrey F. Ciarrochi		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 455 School House Ln		<b>Transaction ID:</b> FF060526.0450024	
City State Zip Code Devon PA 19333-1222	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James E. Rhude		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 2200 E 41st St		<b>Transaction ID:</b> FF060526.0450025	
City State Zip Code Hibbing MN 55746-3289	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Rhode And Fryboner Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Raymond B. Huttig		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 639 28th St		<b>Transaction ID:</b> FF060526.0450026	
City State Zip Code San Francisco CA 94131-2115	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 853 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roger E. Wagner

Mailing Address 2018 Rancho Vista Dr

City State Zip Code  
Twin Falls ID 83301-4326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wagner Transportation Co. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

**Transaction ID:** FF060526.0460003

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Earl Martin

Mailing Address 735 Trademark PI

City State Zip Code  
Houston TX 77079-2413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Martin Interests Inc Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

**Transaction ID:** FF060526.0460010

Amount of Each Receipt this Period  
151.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Harry C. Van Kirk

Mailing Address 659 Winding Hollow Dr

City State Zip Code  
Franklin Lks NJ 07417-2827

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

**Transaction ID:** FF060526.0460014

Amount of Each Receipt this Period  
26.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	278.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 854 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mahrukh Neville

Mailing Address 11 Macintosh Rd

City State Zip Code  
Norwalk CT 06851-5908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 266.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 25 / 2006

Transaction ID: FF060526.0460017

Amount of Each Receipt this Period  
76.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gary J. Thompson

Mailing Address 82 Lofgren Rd

City State Zip Code  
Avon CT 06001-3170

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hartford Financial Services Executive

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 621.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 25 / 2006

Transaction ID: FF060526.0460040

Amount of Each Receipt this Period  
311.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Al. Kojasteh

Mailing Address 1937 Crosspoint Ct

City State Zip Code  
Santa Rosa CA 95403-7961

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Realty World Real Estate

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 25 / 2006

Transaction ID: FF060526.0460045

Amount of Each Receipt this Period  
251.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>638.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 855 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard E. Berent		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 3131 Sprucewood Rd		<b>Transaction ID:</b> FF060526.0500056	
City Wilmette	State IL	Zip Code 60091-1108	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Phyllis I. Hill		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 105 Wactor St		<b>Transaction ID:</b> FF060526.0510005	
City Sumter	State SC	Zip Code 29150-4544	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1126.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Mary E Sien		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 14275 Sorrel Ln		<b>Transaction ID:</b> FF060526.0520003	
City Reno	State NV	Zip Code 89511-6743	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Sien & Associates LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	801.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 856 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joseph Mammarelli, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 60 S 24th St		<b>Transaction ID:</b> FF060526.0520004	
City State Zip Code Pittsburgh PA 15203-2122	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Alloy-Oxygen	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Fred J. Beck		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 3333 N Wayne St		<b>Transaction ID:</b> FF060526.0520007	
City State Zip Code Angola IN 46703-7310	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fred Beck & Associates, LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Michele M. Monti		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2306 E Apache Blvd		<b>Transaction ID:</b> FF060530.0020001	
City State Zip Code Tempe AZ 85281-4920	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 857 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Glynn C. Key, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3241 Highway 164		<b>Transaction ID:</b> FF060530.0020002	
City State Zip Code Mc David FL 32568-2200	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8751.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Seyed A. Rooholamini		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 14445 Olive View Dr		<b>Transaction ID:</b> FF060530.0020003	
City State Zip Code Sylmar CA 91342-1437	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Olive View-ucla Medical Center	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Bruce E. Slater		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 199 Pomeroy Rd		<b>Transaction ID:</b> FF060530.0020004	
City State Zip Code Parsippany NJ 07054-3706	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Community Hope	Occupation Secretary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 858 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Veronica T. Strickland</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 8809 Swamp Fox Hwy W Ste 102		<b>Transaction ID: FF060530.0020005</b>	
City Tabor City	State NC	Zip Code 28463-8601	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Practical Employee Solutions Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jack A. Belz</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 100 Peabody Pl Ste 1400		<b>Transaction ID: FF060530.0030001</b>	
City Memphis	State TN	Zip Code 38103-3648	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Belz Enterprises	Occupation Realestate Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Carol Mack</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 860 United Nations Plz		<b>Transaction ID: FF060530.0030002</b>	
City New York	State NY	Zip Code 10017-1810	Amount of Each Receipt this Period 10000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	15150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 859 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Stephen F. Serbin

Mailing Address 1910 Gregg St

City State Zip Code  
Columbia SC 29201-2618

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Family Medicine Centers Of Sc  
Occupation  
C E O

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060530.0030003

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David C. Rich

Mailing Address 555 W 57th St Ste 1500

City State Zip Code  
New York NY 10019-2925

FEC ID number of contributing federal political committee. **C**

Name of Employer  
INFO REQUESTED  
Occupation  
INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060530.0030004

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mitchell S. Scott

Mailing Address 4624 River Rd

City State Zip Code  
Allendale SC 29810-7518

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Collum's Lumber Products LLC  
Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2006

Transaction ID: FF060530.0030005

Amount of Each Receipt this Period  
12500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	20000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 860 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Shirley Reid-Frahm</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1020 Fallen Leaf Rd		<b>Transaction ID: FF060530.0040001</b>	
City State Zip Code Arcadia CA 91006-1903	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Consultant	Aggregate Year-to-Date ▼ 6000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Ms. Kirsten Ardleigh Chadwick</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 312 Cloverway Dr		<b>Transaction ID: FF060530.0050001</b>	
City State Zip Code Alexandria VA 22314-4841	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fierce, Isakowitz & Blalock Occupation Senior VP	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael C. Linn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 100 1st Ave Ste 250		<b>Transaction ID: FF060530.0060001</b>	
City State Zip Code Pittsburgh PA 15222-1514	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Meridian Exploration Corp. Occupation Lawyer	Aggregate Year-to-Date ▼ 25000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	32500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 861 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Gary R. Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 8036 Madison Blvd Ste 105		<b>Transaction ID: FF060530.0060002</b>	
City State Zip Code Madison AL 35758-2019	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sec Holdings Ltd	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Michel J. Orradre</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 67100 Sargeant Canyon Rd		<b>Transaction ID: FF060530.0090007</b>	
City State Zip Code San Ardo CA 93450-8901	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Rancher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 566.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Donald L. Flamm</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 5333 W Melinda Ln		<b>Transaction ID: FF060530.0120007</b>	
City State Zip Code Glendale AZ 85308-9300	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5101.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 862 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lisa A. Ritter

Mailing Address 3601 N Front St

City State Zip Code  
Harrisburg PA 17110-1533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lisa A Ritter CPA Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060530.0140001

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Frederick B. Smith, Jr.

Mailing Address 4712 SW 6th Ave  
Apt 210

City State Zip Code  
Topeka KS 66606-2272

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060530.0160002

Amount of Each Receipt this Period  
80.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Punyamurtula S. Kishore

Mailing Address PO Box 470799

City State Zip Code  
Brookline Vlg MA 02447-0799

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Preventive Medicine and Associate Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060530.0210002

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	630.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 863 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Oscar A. Braun

Mailing Address 1589 Higgins Canyon Rd

City State Zip Code  
Half Moon Bay CA 94019-2531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Smiles Virtual Chairs-ide Net CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060530.0210004

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter Marlow

Mailing Address 12250 Woodley Ave

City State Zip Code  
Granada Hills CA 91344-2847

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Business Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060530.0230003

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Heater

Mailing Address 915 Riverside Dr

City State Zip Code  
Gassaway WV 26624-1127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GO Mart Inc. Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060530.0320010

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 864 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Elinor M. Beier

Mailing Address 1609 Ravenswood Way

City State Zip Code  
Cherry Hill NJ 08003-2927

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: FF060530.0350001

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth Grosse, Jr.

Mailing Address 376 Indian Creek Rd

City State Zip Code  
Telford PA 18969-2266

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: FF060530.0350012

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
P. Kriebel

Mailing Address 1018 W Main St

City State Zip Code  
Franklin TN 37064-2732

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: FF060530.0360003

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 865 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David M. Traver		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 3358 Lake View Dr		<b>Transaction ID:</b> FF060530.0360005	
City Knoxville	State TN	Zip Code 37919-6667	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Deon Kirk Shaffer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 116 Abbottsford		<b>Transaction ID:</b> FF060530.0360006	
City Nashville	State TN	Zip Code 37215-2439	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert L. Taylor, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 7061 Dawnhill Rd		<b>Transaction ID:</b> FF060530.0420031	
City Memphis	State TN	Zip Code 38135-1857	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 466.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	440.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 866 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Jane M. Burton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 2404 Pueblo Dr		<b>Transaction ID:</b> FF060530.0440043	
City Lafayette	State IN	Zip Code 47909-2753	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation Homemaker	Aggregate Year-to-Date ▼ 300.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Cecil Cupp, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 161 Hosta Bay		<b>Transaction ID:</b> FF060530.0440058	
City Hot Springs	State AR	Zip Code 71913-9752	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William M. Snow, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 532 Northpark Dr		<b>Transaction ID:</b> FF060530.0440059	
City Bossier City	State LA	Zip Code 71111-2242	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 821.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 867 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James E. Lanier

Mailing Address 310 Carlyss Dr

City State Zip Code  
Sulphur LA 70665-7924

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bevel Corporation Iron Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

**Transaction ID:** FF060530.0450065

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Baldev M. Patel

Mailing Address 1102 6th Ave SE

City State Zip Code  
Decatur AL 35601-4010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Aneirc Inc Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
431.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

**Transaction ID:** FF060530.0460049

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ronald J. Sims

Mailing Address 16561 Sugargrove Dr

City State Zip Code  
Whittier CA 90604-4046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

**Transaction ID:** FF060530.0460077

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **150.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 868 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Sune Gronlund

Mailing Address 5 Dry River Ct

City Redding State CT Zip Code 06896-2333

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060530.0470002

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Louis J. Nagy

Mailing Address 1655 McGill Ave

City Mobile State AL Zip Code 36604-1218

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060530.0470014

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Norman Brassler

Mailing Address PO Box 447

City Buck Hill Fls State PA Zip Code 18323-0447

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060530.0470028

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	401.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 869 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Mary Ellen Loyd

Mailing Address 1102 Wedgewood PI

City State Zip Code  
Newton KS 67114-4559

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: FF060530.0480032

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Lori Bernick

Mailing Address 22812 Fleetwood Dr

City State Zip Code  
Saint Cloud MN 56301-9299

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: FF060530.0480064

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roy Knipper, Jr.

Mailing Address 441-19 White Tail Dr

City State Zip Code  
Aurora OH 44202-7514

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: FF060530.0480083

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 870 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Delton P. Stevens

Mailing Address 5859 Central Ave

City State Zip Code  
Bonita CA 91902-2840

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Financial Planner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060530.0490013

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Mary K. Hackerman

Mailing Address 3402 Ella Lee Ln

City State Zip Code  
Houston TX 77027-4141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060530.0490039

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James K. Wellman, Sr.

Mailing Address 10119 NE South Beach Dr

City State Zip Code  
Bainbridge Island WA 98110-2359

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060530.0530023

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **450.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 871 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. William H. Simon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1313 Partridge Ln		Transaction ID: FF060530.0560002	
City Villanova	State PA	Amount of Each Receipt this Period 250.00	
Zip Code 19085-1922			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Lucille C. Holcomb		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 605 19th Ave S		Transaction ID: FF060530.0570021	
City Birmingham	State AL	Amount of Each Receipt this Period 50.00	
Zip Code 35205-6455			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Truett W. Flacher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 702 E Grace St		Transaction ID: FF060530.0570026	
City Brownfield	State TX	Amount of Each Receipt this Period 75.00	
Zip Code 79316-3559			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	375.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 872 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David V. Burgett

Mailing Address 3035 Calle Bonita

City State Zip Code  
Santa Ynez CA 93460-9708

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

**Transaction ID:** FF060530.0570032

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert C. Runkle

Mailing Address 303M Depot St  
PO Box 280

City State Zip Code  
Altona IL 61414-0280

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

**Transaction ID:** FF060530.0570033

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stanley A. Ryan

Mailing Address PO Box 1383

City State Zip Code  
Rainier OR 97048-1383

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

**Transaction ID:** FF060530.0570039

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>610.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 873 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Elpidio E. Taveras</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 5238 Central Ave		<b>Transaction ID: FF060530.0580001</b>	
City State Zip Code Chattanooga TN 37410-2013	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Neighborhood Grocery Occupation Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Paul J. Spina, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 2108 Swan Lake Cv		<b>Transaction ID: FF060530.0580004</b>	
City State Zip Code Birmingham AL 35244-3316	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Real Estate Developer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Hanxian Huang</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 26540 Ace Ave Ste I-102		<b>Transaction ID: FF060530.0580008</b>	
City State Zip Code Leesburg FL 34748-8279	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer C Pharmax Inc Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 874 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Faye A. Hunt</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 7065 W 130th St		<b>Transaction ID: FF060530.0580040</b>	
City State Zip Code Parma Heights OH 44130-7805	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. John D. Mikelsons</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1419 Sanderling Cir		<b>Transaction ID: FF060530.0580042</b>	
City State Zip Code Sanibel FL 33957-3640	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Edward R. Bartley, MD</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 12811 Kent Ct		<b>Transaction ID: FF060530.0580063</b>	
City State Zip Code Carmel IN 46032-8648	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Northwest Radiology	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 875 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. John R. Newlin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 420 Stoneybrook Dr		<b>Transaction ID:</b> FF060530.0580082	
City State Zip Code Kettering OH 45429-5354	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Attorney	Aggregate Year-to-Date ▼ 201.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jack M. Clifford		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 35640		<b>Transaction ID:</b> FF060530.0580086	
City State Zip Code Albuquerque NM 87176-5640	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jack M. Clifford & Company Occupation President	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Gary Wayne Winkler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1173 Cathedral Cir		<b>Transaction ID:</b> FF060530.0580105	
City State Zip Code Madison AL 35758-8908	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Boeing Occupation Aerospace Engineer	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 876 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Will Steverson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 96		<b>Transaction ID:</b> FF060530.0580132	
City Brewton	State AL	Amount of Each Receipt this Period 110.00	
Zip Code 36427-0096		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 220.00			

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Gail C. Brochu		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 1445		<b>Transaction ID:</b> FF060530.0580141	
City Edgartown	State MA	Amount of Each Receipt this Period 25.00	
Zip Code 02539-1445		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 326.00			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Lenox C. Stevens		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 4704 W Ballast Point Blvd		<b>Transaction ID:</b> FF060530.0590006	
City Tampa	State FL	Amount of Each Receipt this Period 100.00	
Zip Code 33611-5608		FEC ID number of contributing federal political committee. C	
Name of Employer Metric Associates	Occupation CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 5200.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	235.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 877 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Billy J. Guin

Mailing Address 924 Erie St

City State Zip Code  
Shreveport LA 71106-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060530.0590014

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Helen Watson

Mailing Address 600 Goodlette Rd N Ste 104

City State Zip Code  
Naples FL 34102-5662

FEC ID number of contributing federal political committee. **C**

Name of Employer A Better Business & Tax Service Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060530.0590028

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Melvin A. Moe

Mailing Address 1102 S 114th St Lot 61

City State Zip Code  
Mesa AZ 85208-7933

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060530.0600003

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	160.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 878 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Bruce Sterling</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 1119		<b>Transaction ID: FF060530.0600012</b>	
City Aztec	State NM	Amount of Each Receipt this Period 1000.00	
Zip Code 87410-1119		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Sterling Brothers Construction Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Victoria Weber</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 287 Rodeo Rd		<b>Transaction ID: FF060530.0600028</b>	
City Santa Fe	State NM	Amount of Each Receipt this Period 100.00	
Zip Code 87505-6304		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Gruma Corp	Occupation Public Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Virginia A. Alter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 10100 Cypress Cove Dr Apt 102		<b>Transaction ID: FF060530.0610008</b>	
City Fort Myers	State FL	Amount of Each Receipt this Period 26.00	
Zip Code 33908-7642		Amount of Each Receipt this Period 26.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1126.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 879 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Galen Radebaugh		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 41 South Rd		<b>Transaction ID:</b> FF060530.0610038	
City Chester	State NJ	Zip Code 07930-2739	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Schering-plough	Occupation Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Edward C. Baltz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 6732 Locksley Dr		<b>Transaction ID:</b> FF060530.0650010	
City Tuscaloosa	State AL	Zip Code 35406-2901	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. George C. Andreas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address PO Box 1789		<b>Transaction ID:</b> FF060531.0010001	
City Middleburg	State VA	Zip Code 20118-1789	Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Andreas Enterprises, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 880 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Janet A. McCann

Mailing Address 947 Arbolado Rd

City State Zip Code  
Santa Barbara CA 93103-2035

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060531.0040001

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Miss Nancy L. Gowing

Mailing Address 307 Paoli Woods

City State Zip Code  
Paoli PA 19301-1539

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060531.0040015

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Teresina V. De Luca

Mailing Address 396 Coventry Rd

City State Zip Code  
Kensington CA 94707-1251

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060531.0140004

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	320.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 881 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ray R. Tsukimura

Mailing Address 3455 Fostoria Way

City San Ramon State CA Zip Code 94583-1317

FEC ID number of contributing federal political committee. **C**

Name of Employer Aerotest Operations Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: FF060531.0180001

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Basta

Mailing Address 7878 E Gainey Ranch Rd Unit 9

City Scottsdale State AZ Zip Code 85258-1755

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: FF060531.0180003

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ante Markota

Mailing Address 811 Rugby Rd

City Phillipsburg State NJ Zip Code 08865-2032

FEC ID number of contributing federal political committee. **C**

Name of Employer European Copper Specialis- ts, Inc Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: FF060531.0210001

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 925.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 882 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Terril A. Efirid		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 2519 W Magill Ave		<b>Transaction ID:</b> FF060531.0250002	
City State Zip Code Fresno CA 93711-1136	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Vivienne H. Wilson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 3200 Fairfield Ave		<b>Transaction ID:</b> FF060531.0300019	
City State Zip Code Fort Worth TX 76116-4608	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Marty G. Salfen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 5008 Bridge Creek Dr		<b>Transaction ID:</b> FF060531.0300027	
City State Zip Code Plano TX 75093-5702	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer lbn	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 883 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Thomas Thomas Dastrup		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1755 N 1780 E		Transaction ID: FF060531.0310002	
City State Zip Code North Logan UT 84341-2193	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Campbell Soup	Occupation Man Sup		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John G. Keck		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 422 Thunderbrook Rd		Transaction ID: FF060531.0320009	
City State Zip Code Garland TX 75044-4904	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Raytheon	Occupation Snr. Systems Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert Ross		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 124		Transaction ID: FF060531.0320015	
City State Zip Code Webbers Falls OK 74470-0124	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Farmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 884 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Carol L. Schaff		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1122 Cook Ave		<b>Transaction ID:</b> FF060531.0400001	
City Billings	State MT	Zip Code 59102-5505	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Garnier S Catering and Candy Sho		Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Gilbert H. Todd		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1604 W Morton Ave		<b>Transaction ID:</b> FF060531.0400002	
City Jacksonville	State IL	Zip Code 62650-2718	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Premiere Bank		Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Donald E. Wallin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 5260 Ashlar Dr		<b>Transaction ID:</b> FF060531.0410002	
City Bloomington	State MN	Zip Code 55437-3365	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 490.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 885 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George W. Newell, Sr.  
Mailing Address 1200 Sharrock Rd  
City State Zip Code  
Reno NV 89510-9715  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
N A S E Insurance Manager  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6  
Transaction ID: FF060531.0410003  
Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry A. Boyd  
Mailing Address 3680 E Turtle Hatch Rd  
City State Zip Code  
Springfield MO 65809-4139  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Bank Of Bolivar Banker  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6  
Transaction ID: FF060531.0410004  
Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Almon Bargas  
Mailing Address 2418 Kelso  
City State Zip Code  
San Antonio TX 78248-0962  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
A Bargas and Associates Salesman  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6  
Transaction ID: FF060531.0420005  
Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 886 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Oswaldo Pedrosa		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 532 High St		<b>Transaction ID:</b> FF060531.0420006	
City Holyoke	State MA	Zip Code 01040-5243	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ozzies Auto Repair Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James L. Price		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1130 Saint Marks Church Rd		<b>Transaction ID:</b> FF060531.0420007	
City Burlington	State NC	Zip Code 27215-9796	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mid-State Tile and Floor Covering Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Pearl He		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 747 N Lake Ave Ste D		<b>Transaction ID:</b> FF060531.0420008	
City Pasadena	State CA	Zip Code 91104-4559	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sincere Domestic Services Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 887 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Charles William		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1456 Limestone Pkwy		Transaction ID: FF060531.0420010	
City State Zip Code Brierfield AL 35035-3926	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Carl Ueland		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 7529 W Shaw Ave		Transaction ID: FF060531.0420016	
City State Zip Code Fresno CA 93722-9411	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation United AGRI Products Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Michele Miller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 120 N Center St		Transaction ID: FF060531.0420025	
City State Zip Code Fredericksburg PA 17026-9701	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Noah and Co. Daycare Center Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 888 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jorge H. Yandolino		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 1080 Douglas Blvd		<b>Transaction ID:</b> FF060531.0420027	
City State Zip Code Roseville CA 95678-2714	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Automotive Services of Roseville	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Paul Peters		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address RR 2 Box 99		<b>Transaction ID:</b> FF060531.0450006	
City State Zip Code Dickinson ND 58601	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jeff L. Gregston		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 711 S Broadway St		<b>Transaction ID:</b> FF060531.0450007	
City State Zip Code Marlow OK 73055-3313	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gregston Nursing Home Inc.	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 889 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Wesley G. Nichols

Mailing Address 9111 Freedom Way NE

City State Zip Code  
Albuquerque NM 87109-6306

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0450014

Amount of Each Receipt this Period  
55.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles D. Rippee

Mailing Address 7370 Alt Sr 49 East

City State Zip Code  
Arcanum OH 45304-9675

FEC ID number of contributing federal political committee. **C**

Name of Employer Alpha Dog Exp, Inc Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0450033

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roy G. Dillabaugh

Mailing Address 865 Oakcreek Dr Ste 201

City State Zip Code  
Dayton OH 45429-2031

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0450035

Amount of Each Receipt this Period  
120.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	185.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 890 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James W. Brett

Mailing Address 6006 Valkeith Dr

City State Zip Code  
Houston TX 77096-3833

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: FF060531.0450041

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William E. Guy

Mailing Address 990 E Del Mar Blvd # 203

City State Zip Code  
Pasadena CA 91106-3252

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2157.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: FF060531.0460014

Amount of Each Receipt this Period  
160.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John H. Warner, Jr.

Mailing Address PO Box 2929

City State Zip Code  
La Jolla CA 92038-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: FF060531.0460021

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 460.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 891 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ronald W. Park

Mailing Address 17388 136th PI SE

City State Zip Code  
Monroe WA 98272-9764

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0460051

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Carl H. Rohman

Mailing Address 1312 Fall Creek Rd

City State Zip Code  
Lincoln NE 68510-4950

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0460062

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Glen S. Wyman, Jr.

Mailing Address 8702 Lenox Ave SW

City State Zip Code  
Lakewood WA 98498-4639

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0470025

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 430.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 892 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Elbert C. Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 856		Transaction ID: FF060531.0470050	
City Renton	State WA	Zip Code 98057-0856	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2291.00		

B. Full Name (Last, First, Middle Initial) Mr. Howard M. Immel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 3 Tee Dr		Transaction ID: FF060531.0470056	
City Iola	State KS	Zip Code 66749-9028	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) Mr. Gerald K. Hart		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 713 W Spruce St PMB 887		Transaction ID: FF060531.0480003	
City Deming	State NM	Zip Code 88030-3548	Amount of Each Receipt this Period 180.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	580.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 893 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Grace P. Cornish

Mailing Address 831 Hickory Dr SW

City State Zip Code  
Marietta GA 30064-3607

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0480008

Amount of Each Receipt this Period  
15.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Margaret D. McCann

Mailing Address 5877 Cedar Oak Cv

City State Zip Code  
Memphis TN 38134-5526

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0490013

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Garrett J. Van Giessen

Mailing Address 2417 Hemlock Ave

City State Zip Code  
Portage MI 49024-1107

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0490038

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 155.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 894 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Susan A. Campbell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 824 Frandora Ln		Transaction ID: FF060531.0490040	
City Houston	State TX	Zip Code 77024-2622	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation Homemaker	Aggregate Year-to-Date ▼ 450.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Howard J. Schmidt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 510 Chickory Field Ln		Transaction ID: FF060531.0490041	
City Pearland	State TX	Zip Code 77584-8130	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Bechtel Corp	Occupation Engineer	Aggregate Year-to-Date ▼ 400.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Opal I. Gardner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 11900 Barryknoll Ln Apt 8118		Transaction ID: FF060531.0490042	
City Houston	State TX	Zip Code 77024-4374	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 601.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 895 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. J. Claude Brannan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address RR 1 Box 238		<b>Transaction ID:</b> FF060531.0490068
City Marietta	State OK	Zip Code 73448-9731
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self Employed	Occupation Rancher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Stuart F. Cooke		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 1 Causeway Dr		<b>Transaction ID:</b> FF060531.0490077
City Ocean Isle Beach	State NC	Zip Code 28469-7505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cooke Realty	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Rosetta A. Frankel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 29 Locust Hollow Dr		<b>Transaction ID:</b> FF060531.0490092
City Monsey	State NY	Zip Code 10952-2410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer RAF Realty	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 896 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Virginia L. Wood		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 217 E 24th St		<b>Transaction ID:</b> FF060531.0490102	
City State Zip Code Tulsa OK 74114-1217	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Linda S. Kopytek		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2032 E Palomino Dr Apt 23102		<b>Transaction ID:</b> FF060531.0510006	
City State Zip Code Gilbert AZ 85296-3353	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Computer Programmer	Aggregate Year-to-Date ▼ 266.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William P. Steele		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 336 Hollybrook Dr		<b>Transaction ID:</b> FF060531.0530049	
City State Zip Code Advance NC 27006-8405	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 897 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark J. Smith

Mailing Address 2903 Lorencita Dr

City State Zip Code  
Santa Maria CA 93455-1911

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Builder/Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0550001

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. H. Guy Hardy

Mailing Address 12700 Lake Ave  
Apt 613

City State Zip Code  
Cleveland OH 44107-1547

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0560002

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Karel R. Wybrands

Mailing Address 4 Cedar Rd

City State Zip Code  
White Hse Sta NJ 08889-3705

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0560014

Amount of Each Receipt this Period  
160.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **760.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 898 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Frank Bumpus		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 45 Paulding Ave		<b>Transaction ID:</b> FF060531.0560029
City State Zip Code Cold Spring NY 10516-2605	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Richard S. Griffith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 3417 Milam St		<b>Transaction ID:</b> FF060531.0560047
City State Zip Code Houston TX 77002-9531	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Richard S Griffiths	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 860.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Gloryanna Terhune		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 4392 Chevy Chase Dr		<b>Transaction ID:</b> FF060531.0570011
City State Zip Code La Canada Flintrid CA 91011-3203	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 899 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edward N. Henderson

Mailing Address 501 Southfield Rd

City State Zip Code  
Shreveport LA 71106-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1151.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0580013

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Taylor, Jr.

Mailing Address 7061 Dawnhill Rd

City State Zip Code  
Memphis TN 38135-1857

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 466.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0590014

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Douglas C. Robinson

Mailing Address 757 NW Meadowood Cir

City State Zip Code  
McMinnville OR 97128-9533

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0590054

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 900 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Andrew F. Barth

Mailing Address 1730 Windsor Rd

City State Zip Code  
San Marino CA 91108-2526

FEC ID number of contributing federal political committee. **C**

Name of Employer Capital Group Companies      Occupation Investment Analyst

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0600004

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John G. Penson

Mailing Address 3756 Armstrong Ave

City State Zip Code  
Dallas TX 75205-3837

FEC ID number of contributing federal political committee. **C**

Name of Employer Penson Properties Inc.      Occupation Investments

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0600006

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Bronson

Mailing Address 24060 Deer Run Rd

City State Zip Code  
Brooksville FL 34601-4548

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED      Occupation INFO REQUESTED

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0600012

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 901 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Albert M. Cunningham

Mailing Address 262 E Barstow Ave

City State Zip Code  
Fresno CA 93710-5032

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0630004

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard S. Griffith

Mailing Address 3417 Milam St

City State Zip Code  
Houston TX 77002-9531

FEC ID number of contributing federal political committee. **C**

Name of Employer Richard S Griffiths Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 860.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0630008

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. H. Frank Gaines

Mailing Address 17506 Northridge Dr

City State Zip Code  
Neosho MO 64850-8741

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0630024

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 185.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 902 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George A. West

Mailing Address PO Box 2137

City State Zip Code  
Belle Glade FL 33430-7137

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0630033

Amount of Each Receipt this Period  
65.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John Bahr

Mailing Address 5125 Camden Rd Apt 4

City State Zip Code  
Madison WI 53716-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer Menards Occupation Office Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 277.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0630035

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Margaret L. Feldkamp

Mailing Address 4633 E Farmdale Ave

City State Zip Code  
Mesa AZ 85206-2725

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060531.0630036

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	141.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 903 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Kimberly J. C. Taflan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 14894 W Cortez St		<b>Transaction ID: FF060531.0630037</b>	
City State Zip Code Surprise AZ 85379-5227	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Gerald J. Grigone</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 11951 Bardmont Dr		<b>Transaction ID: FF060531.0630044</b>	
City State Zip Code Saint Louis MO 63126-2901	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation C.j. Thomas Co Insurance Broker	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Nels W. Hanson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 4317 Chambers Lake Dr SE		<b>Transaction ID: FF060531.0630066</b>	
City State Zip Code Lacey WA 98503-3132	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Tree Farmer	Aggregate Year-to-Date ▼ 310.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 904 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Lavinia Lavinia Fogle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 6217 Malcolm Dr		<b>Transaction ID:</b> FF060531.0640001	
City State Zip Code Dallas TX 75214-3021	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Robert G. Reaves		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 10831 SE Skyline Dr		<b>Transaction ID:</b> FF060531.0640002	
City State Zip Code Santa Ana CA 92705-2415	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David L. Brinkman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 22615 Road 132		<b>Transaction ID:</b> FF060531.0640016	
City State Zip Code Tulare CA 93274-6221	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Brinkman & Sons Spreading	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 905 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Marsha H. Loar-Ward

Mailing Address PO Box 122

City State Zip Code  
Crescent City CA 95531-0122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0640031

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry D. Bench

Mailing Address PO Box 435

City State Zip Code  
Waynesville MO 65583-0435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self - Employed Bench Motor Co. Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0640039

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Carol L. Schaff

Mailing Address 1122 Cook Ave

City State Zip Code  
Billings MT 59102-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Garnier S Catering and Candy Sho Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0640042

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 906 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Walter H. Cobbs, Jr.

Mailing Address 216 Parkwood Ave

City State Zip Code  
Salem VA 24153-2106

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: FF060531.0650022

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. R. Charles Waymire

Mailing Address 15176 Burdette St

City State Zip Code  
Omaha NE 68116-7192

FEC ID number of contributing federal political committee. **C**

Name of Employer Trans Mid America Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: FF060531.0650081

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jon Greenwell

Mailing Address 44 Brams Point Rd

City State Zip Code  
Hilton Head Island SC 29926-2003

FEC ID number of contributing federal political committee. **C**

Name of Employer Real Estate Investor Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: FF060531.0650085

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 907 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Jeannie Pascale</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>680 N Meandering Way</b>		<b>Transaction ID: FF060531.0660003</b>	
City State Zip Code <b>Fairview TX 75069-9595</b>	Amount of Each Receipt this Period 1001.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1501.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Willet D. Faulkner</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>278 Aileen Dr</b>		<b>Transaction ID: FF060531.0660014</b>	
City State Zip Code <b>Columbus MS 39705-3055</b>	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 351.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Elisa Hahl-Harwick</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>7900 Martingale Ln</b>		<b>Transaction ID: FF060531.0660015</b>	
City State Zip Code <b>Las Vegas NV 89123-2019</b>	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Mft/sac			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1103.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 908 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Earl W. Nickel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 336 Alderson Ave		<b>Transaction ID:</b> FF060531.0660037	
City Billings	State MT	Zip Code 59101-5916	Amount of Each Receipt this Period 151.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Lavinia Lavinia Fogle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 6217 Malcolm Dr		<b>Transaction ID:</b> FF060531.0660057	
City Dallas	State TX	Zip Code 75214-3021	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. H. Paul Scholte, IV		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1403 Peachtree Blvd		<b>Transaction ID:</b> FF060531.0660074	
City Richmond	State VA	Zip Code 23226-1141	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	312.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 909 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Homa Gerami		Date of Receipt MM / DD / YYYY 05 / 30 / 2006
Mailing Address 257 Salvador Sq		<b>Transaction ID:</b> FF060531.0660080
City Winter Park	State FL	Zip Code 32789-5618
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 50.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Seyed M. Sarvestani		Date of Receipt MM / DD / YYYY 05 / 30 / 2006
Mailing Address 2195 Briarcliff Rd NE		<b>Transaction ID:</b> FF060531.0660086
City Atlanta	State GA	Zip Code 30329-3449
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 101.00
Name of Employer K & M	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Stephen L. Webb		Date of Receipt MM / DD / YYYY 05 / 30 / 2006
Mailing Address 7839 Braun Cir		<b>Transaction ID:</b> FF060531.0660089
City San Antonio	State TX	Zip Code 78250-2668
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 51.00
Name of Employer Watson Pharmaceutical	Occupation Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	202.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 910 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Ione E. Half

Mailing Address 107 Ranch Rd 620 S  
Ste 102

City State Zip Code  
Lakeway TX 78734-3999

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Half Interests Partner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 370.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0670018

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Philip S. Peterson

Mailing Address 11193 NE 8th Ct

City State Zip Code  
Biscayne Park FL 33161-7205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 610.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0670047

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Howard L. Smith

Mailing Address 2904 Diamond A Dr

City State Zip Code  
Roswell NM 88201-3417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0680015

Amount of Each Receipt this Period  
225.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	375.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 912 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Ellen B. Rice

Mailing Address 6258 Amber Brook Dr

City Hixson State TN Zip Code 37343-3362

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0690041

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Louis V. Francioli

Mailing Address 5620 48th Dr NE

City Marysville State WA Zip Code 98270-5720

FEC ID number of contributing federal political committee. **C**

Name of Employer Liberty Manufacturing Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0690076

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael R. Peru

Mailing Address 781 Eastridge Dr

City Medford State OR Zip Code 97504-8919

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Developer

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060531.0690077

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 913 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harvey S. Walseth

Mailing Address 436 Stanley Dr

City State Zip Code  
**Santa Barbara CA 93105-3726**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** FF060531.0690100

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter A. Pervi

Mailing Address 1045 Rustling Oaks Dr

City State Zip Code  
**Millersville MD 21108-2427**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Locked Martin Program Mgr.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** FF060531.0690104

Amount of Each Receipt this Period  
1.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Brenton L. Conrad

Mailing Address 5336 Elkhorn Rd

City State Zip Code  
**Las Vegas NV 89131-2712**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Werdco Bc Inc Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** FF060531.0690107

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional) ..... 3.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 914 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Suzanne M. Carroll

Mailing Address 2802 Thaxton Ln

City State Zip Code  
Oakton VA 22124-3019

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: FF060531.0700001

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Lisa M. Mascolo

Mailing Address 10919 Belgravia Ct

City State Zip Code  
Great Falls VA 22066-3106

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: FF060531.0700002

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Herb D. Vest

Mailing Address 16434 Ashbourne Dr

City State Zip Code  
Dallas TX 75248-2804

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: FF060531.0700003

Amount of Each Receipt this Period  
25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	30500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 915 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Alan L. Boeckmann

Mailing Address 4383 W Northwest Hwy

City State Zip Code  
Dallas TX 75220-3854

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Flour President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060531.0700004

Amount of Each Receipt this Period  
10000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey M. MacKinnon

Mailing Address 3753 Oliver St NW

City State Zip Code  
Washington DC 20015-2531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ryan, Phillips, Utrecht & Mackinnon Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060531.0700005

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. J. Christopher Reyes

Mailing Address 735 E Westminster Rd

City State Zip Code  
Lake Forest IL 60045-2232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Reyes Holdings, LLC Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060531.0700006

Amount of Each Receipt this Period  
12500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	27500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 916 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. M. Jude Reyes

Mailing Address 9500 Bryn Mawr Ave

City State Zip Code  
Rosemont IL 60018-5211

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Business Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060531.0700007

Amount of Each Receipt this Period  
12500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert W. Borgmann

Mailing Address 795 Porterford Rd

City State Zip Code  
Union MO 63084-3903

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060531.0700008

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert T. Howard

Mailing Address 5500 Glenallen St

City State Zip Code  
North Springfield VA 22151-3217

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: FF060531.0700009

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **14000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 917 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Dorothy H. Owen

Mailing Address 137 Canterbury Rd

City State Zip Code  
**Eau Claire WI 54701-7105**

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **5350.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 18 / 2006**

**Transaction ID: FF060531.0700010**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
Ms. Peggy M. Drummond

Mailing Address 1000 Urban Center Dr Ste 300

City State Zip Code  
**Birmingham AL 35242-2572**

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **7500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 18 / 2006**

**Transaction ID: FF060531.0700011**

Amount of Each Receipt this Period  
**7500.00**

**C.** Full Name (Last, First, Middle Initial)  
Ms. Abbie K. Drummond

Mailing Address 501 Glen Oaks Dr

City State Zip Code  
**Jasper AL 35504-8688**

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **7500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 18 / 2006**

**Transaction ID: FF060531.0700012**

Amount of Each Receipt this Period  
**7500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>16000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 918 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joyce Cooper Smith		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 508 Laporte St SE		<b>Transaction ID:</b> FF060531.0700013	
City State Zip Code Rome GA 30161-6243	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Lee Roy Mitchell		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 3900 Dallas Pkwy Ste 500		<b>Transaction ID:</b> FF060531.0700014	
City State Zip Code Plano TX 75093-7871	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cinemark Usa, Inc.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William R. Kerr		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2006	
Mailing Address PO Box 846		<b>Transaction ID:</b> FF060531.0720001	
City State Zip Code Miller Place NY 11764-0846	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Apt Corp		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	30250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 919 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. R. Paul Sprague		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 70 Main St		<b>Transaction ID:</b> FF060531.0720002	
City State Zip Code New Canaan CT 06840-4760	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Warwick Group, Inc.	Occupation Exc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Steven Rembos		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 311 N Monroe St		<b>Transaction ID:</b> FF060531.0720003	
City State Zip Code Hinsdale IL 60521-3148	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Foot & Ankle Institute	Occupation Surgeon		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Vance R. Moore, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 301 Richey Rd		<b>Transaction ID:</b> FF060531.0720004	
City State Zip Code Leesburg FL 34748-8582	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Best Lab Deals Inc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	55000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 920 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Josephine A. Lile</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address <b>583 Holliday Ln</b>		<b>Transaction ID: FF060531.0720005</b>	
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46260-3516</b>	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Concrete Plus</b>	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5050.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Patricia H. Blanton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address <b>207 Oak Ridge Dr</b>		<b>Transaction ID: FF060531.0720006</b>	
City <b>Boone</b>	State <b>NC</b>	Zip Code <b>28607-7010</b>	Amount of Each Receipt this Period 3500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Self</b>	Occupation <b>Writer</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 11900.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Bruce E. Slater</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address <b>199 Pomeroy Rd</b>		<b>Transaction ID: FF060531.0720007</b>	
City <b>Parsippany</b>	State <b>NJ</b>	Zip Code <b>07054-3706</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Community Hope</b>	Occupation <b>Secretary</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	9000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 921 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Nancy E. Lyons

Mailing Address 580 Piedmont St

City State Zip Code  
Wilmington OH 45177-2521

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1501.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060531.0720011

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Geraldine Karafin

Mailing Address 2661 S Course Dr Apt 710

City State Zip Code  
Pompano Beach FL 33069-3946

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060531.0720012

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Amelia M. Campbell

Mailing Address 3870 Crenshaw Blvd Ste 205

City State Zip Code  
Los Angeles CA 90008-1815

FEC ID number of contributing federal political committee. **C**

Name of Employer A C Home Health Agency Inc. Occupation R N Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060531.0720013

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 922 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Yen T. Huang</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 9405 Pinewood Dr		<b>Transaction ID: FF060531.0720014</b>	
City State Zip Code Dallas TX 75243-6521	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation Inventor/engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Krishna Kumar</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 718 W 12th St		<b>Transaction ID: FF060531.0720015</b>	
City State Zip Code Cookeville TN 38501-7788	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5100.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Herbert Dodson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 196 Mallard Point Dr		<b>Transaction ID: FF060531.0720016</b>	
City State Zip Code Georgetown KY 40324-9201	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Oralle Corp.	Occupation Sr.Dir. of Justice		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2900.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 923 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Elias Chammas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address G3348 Flushing Rd		<b>Transaction ID: FF060531.0720017</b>	
City State Zip Code Flint MI 48504-4239	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Paradise Mini-mart	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Iqbal Akhter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6758 N Leroy Ave		<b>Transaction ID: FF060531.0720018</b>	
City State Zip Code Lincolnwood IL 60712-3204	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Prevention & Treatment	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Robert E. Maddux</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2264 McIngvale Rd		<b>Transaction ID: FF060531.0720019</b>	
City State Zip Code Hernando MS 38632-8710	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Dr. Robert E. Maddux Dds	Occupation Dentist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	9000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 924 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Jack H. Salmans</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 550 N 159th St E Ste 2000		<b>Transaction ID: FF060531.0720020</b>	
City State Zip Code Wichita KS 67230-7568	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Prohome International	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5050.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Bryan E. Smith</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 717 W Powell Ln		<b>Transaction ID: FF060531.0720021</b>	
City State Zip Code Austin TX 78753-6252	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fast & Fair	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Rosalie M. C. Yap</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 3510 Turtle Creek Blvd Apt 15D		<b>Transaction ID: FF060531.0730002</b>	
City State Zip Code Dallas TX 75219-5545	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 925 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Stuart Bloom		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 138 Sidney Bay Dr		<b>Transaction ID:</b> FF060531.0730003	
City State Zip Code Newport Coast CA 92657-2112	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychologist Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Peter Lawson-Johnston		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 25 W 53rd St 16 Fl		<b>Transaction ID:</b> FF060531.0730004	
City State Zip Code New York NY 10019-5401	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Guggenheim Bros. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Partner Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Barry A. Schlech		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 120 Enchanted Ct S		<b>Transaction ID:</b> FF060531.0730005	
City State Zip Code Burleson TX 76028-2378	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Alcon Labs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Scientist Aggregate Year-to-Date ▼ 5885.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 926 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Betty Gail Howard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 24353 Mornington Dr		<b>Transaction ID: FF060531.0730006</b>	
City State Zip Code Valencia CA 91355-2038	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Alexander K. Buck</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 44 Nassau St Ste 300		<b>Transaction ID: FF060531.0730007</b>	
City State Zip Code Princeton NJ 08542-4511	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self		Occupation Venture Capitalist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Jimpsey Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2727 Walton Way		<b>Transaction ID: FF060531.0730008</b>	
City State Zip Code Augusta GA 30909-3823	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 927 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Jason K. Morris

Mailing Address 618 Frederick Dr

City Cleveland State MS Zip Code 38732-2006

FEC ID number of contributing federal political committee. **C**

Name of Employer Access Health Imaging Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5650.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: FF060531.0730009

Amount of Each Receipt this Period  
5650.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Virginia D. Long

Mailing Address 22946 Espada Dr

City Salinas State CA Zip Code 93908-1015

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: FF060601.0020006

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Helen S. Cox

Mailing Address 753 Majorca Ave

City Coral Gables State FL Zip Code 33134-3754

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1675.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: FF060601.0020027

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5875.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 928 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Carolyn Ann Stewart

Mailing Address 6006 Balcones Ct  
Apt 9

City State Zip Code  
El Paso TX 79912-3340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0020047

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Knute E. Farness

Mailing Address PO Box 650

City State Zip Code  
Minocqua WI 54548-0650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Brandy Lake Bp C-store

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0030060

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Jeanette M. Rodeghier

Mailing Address 1440 Township Ave

City State Zip Code  
Wisconsin Rapids WI 54494-6332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0030061

Amount of Each Receipt this Period  
80.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	430.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 929 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Ms. Gerry Clark		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 604		Transaction ID: FF060601.0030083	
City Louisville	State MS	Zip Code 39339-0604	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00	

B. Full Name (Last, First, Middle Initial) Mrs. Mary C. Farrell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 27687		Transaction ID: FF060601.0040002	
City Panama City	State FL	Zip Code 32411-7687	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Mr. Thomas E. Edel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 312 N Hesperides St		Transaction ID: FF060601.0050033	
City Tampa	State FL	Zip Code 33609-2021	Amount of Each Receipt this Period 225.00
FEC ID number of contributing federal political committee. C			
Name of Employer I D Group		Occupation Advertising Exec.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	375.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 930 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Edith L. Spicer		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 445 Union St		<b>Transaction ID:</b> FF060601.0050040	
City Marseilles	State IL	Amount of Each Receipt this Period 25.00	
Zip Code 61341-1513		Transaction ID: FF060601.0050040	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 25.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	Amount of Each Receipt this Period 25.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Janice Drake		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address RR 1 Box 206		<b>Transaction ID:</b> FF060601.0050059	
City Nowata	State OK	Amount of Each Receipt this Period 100.00	
Zip Code 74048-9729		Transaction ID: FF060601.0050059	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	Amount of Each Receipt this Period 100.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joseph W. Edwards		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 4066 Glacier Hills Cir		<b>Transaction ID:</b> FF060601.0050073	
City Ann Arbor	State MI	Amount of Each Receipt this Period 100.00	
Zip Code 48105-3646		Transaction ID: FF060601.0050073	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	Amount of Each Receipt this Period 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	225.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 931 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Peggy Pitchford

Mailing Address 2022 Brushy Rd

City Columbus State TX Zip Code 78934-3459

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0080013

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Lavinia Lavinia Fogle

Mailing Address 6217 Malcolm Dr

City Dallas State TX Zip Code 75214-3021

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0090017

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roy E. Walker

Mailing Address 12634 Goodwood Blvd

City Baton Rouge State LA Zip Code 70815-6822

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0100003

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 932 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John E. Rex

Mailing Address 1420 Santo Domingo Ave

City Duarte State CA Zip Code 91010-2632

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	6

**Transaction ID:** FF060601.0100020

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Anna L. Lathrop

Mailing Address PO Box 182

City Marion Center State PA Zip Code 15759-0182

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	6

**Transaction ID:** FF060601.0100031

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David K. Radtke

Mailing Address 9960 E County Road A

City Solon Springs State WI Zip Code 54873-8417

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	6

**Transaction ID:** FF060601.0110069

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 933 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Franz J. Thiel		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 1207 Seaway Dr		<b>Transaction ID:</b> FF060601.0140004	
City State Zip Code Fort Pierce FL 34949-3147	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 402.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Hannah J. Cunningham		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 46 Tokalon Pl		<b>Transaction ID:</b> FF060601.0220025	
City State Zip Code Metairie LA 70001-3020	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Alice J. Wilks		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 3841 Greenridge		<b>Transaction ID:</b> FF060601.0230016	
City State Zip Code Cibolo TX 78108-2212	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	145.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 934 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Julio Valdivieso</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 40472		<b>Transaction ID: FF060601.0230022</b>	
City State Zip Code Downey CA 90239-1472	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Eme Inc.	Occupation Salesman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.50		

Full Name (Last, First, Middle Initial) <b>B. Mr. Bruce E. Roddick</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 38680 Calle De La Siesta		<b>Transaction ID: FF060601.0230055</b>	
City State Zip Code Murrieta CA 92563-5758	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Ingrid E. Fry</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 909 N 3rd St		<b>Transaction ID: FF060601.0240006</b>	
City State Zip Code Johnstown CO 80534-8800	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	230.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 935 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William A. Burgett

Mailing Address 1575 Belvidere St  
Apt 111

City State Zip Code  
El Paso TX 79912-2635

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      276.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** FF060601.0240046

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David T. Bursleson

Mailing Address 9002 Rancich St

City State Zip Code  
El Paso TX 79904-1029

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1320.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** FF060601.0240048

Amount of Each Receipt this Period  
160.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Barbara A. Wittick

Mailing Address 9 Doris St

City State Zip Code  
Wallingford CT 06492-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Chibb & Sons      Occupation Ins Sales

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** FF060601.0250008

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	285.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 936 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John L. Ingersoll		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 52 Ryders Ln		Transaction ID: FF060601.0250010	
City Wilton	State CT	Zip Code 06897-1721	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Anne M. Harper		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 85 Scottsdale Dr		Transaction ID: FF060601.0250027	
City Troy	State MI	Zip Code 48084-1716	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 602.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Emma A. Hinshaw		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 106 Sunshine Hill St Apt 201		Transaction ID: FF060601.0250044	
City Spruce Pine	State NC	Zip Code 28777-2849	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	220.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 937 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Howard J. Schmidt		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 510 Chickory Field Ln		<b>Transaction ID:</b> FF060601.0260005	
City State Zip Code Pearland TX 77584-8130	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bechtel Corp	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. W. C. Thomas		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 12325 Hillcroft St		<b>Transaction ID:</b> FF060601.0260016	
City State Zip Code Houston TX 77035-5305	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Carroll E. Caldwell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 4263 Bay Beach Ln Apt 211		<b>Transaction ID:</b> FF060601.0270037	
City State Zip Code Fort Myers Beach FL 33931-6902	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 938 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Shizuko Austin

Mailing Address PO Box 469

City Nisswa State MN Zip Code 56468-0469

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 642.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060601.0280011

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard W. Matthews

Mailing Address 161 Marshall Rd

City Batesville State MS Zip Code 38606-6600

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060601.0290056

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Marvin A. Keller

Mailing Address 330 S Center St Ste 402

City Casper State WY Zip Code 82601-2876

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060601.0300003

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	275.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 939 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. E. Reid Hunter

Mailing Address PO Box 30207

City State Zip Code  
Sea Island GA 31561-0207

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 801.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0300012

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Irvin J. Larson

Mailing Address 11462 Pala Mesa Dr

City State Zip Code  
Northridge CA 91326-1839

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 976.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0300024

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Victor E. Dewhirst

Mailing Address 805 Harris St

City State Zip Code  
Frontenac KS 66763-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 426.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0300044

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	525.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 940 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey J. Woods

Mailing Address 4932 Eckert Cir

City State Zip Code  
Castle Rock CO 80104-5214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
J Almes Ceramic Artist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 245.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0300045

Amount of Each Receipt this Period  
110.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Margaret S. Bunning

Mailing Address 405 Agate St

City State Zip Code  
Rock Springs WY 82901-6704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0310006

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Vera F. Berg

Mailing Address 202 Oak Ln

City State Zip Code  
Euless TX 76039-2304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 201.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060601.0310018

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	260.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 941 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Charles R. Woods		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 677 SW 20th St		<b>Transaction ID:</b> FF060601.0310031	
City State Zip Code Chehalis WA 98532-4201	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Panaila Forman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 243 Pebblestone Dr		<b>Transaction ID:</b> FF060601.0310036	
City State Zip Code Huntsville AL 35806-1180	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harvey S. Walseth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 436 Stanley Dr		<b>Transaction ID:</b> FF060601.0310058	
City State Zip Code Santa Barbara CA 93105-3726	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	335.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 942 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. John K. McCotter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>239 Rocklyn Ave</b>		<b>Transaction ID: FF060601.0320031</b>	
City <b>Lynbrook</b>	State <b>NY</b>	Amount of Each Receipt this Period 25.00	
Zip Code <b>11563-3745</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Sears Roebuck &amp; Co.</b>	Occupation <b>Stock Person</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. David L. Smith</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>2512 Fairmont Ave</b>		<b>Transaction ID: FF060601.0320036</b>	
City <b>Dayton</b>	State <b>OH</b>	Amount of Each Receipt this Period 100.00	
Zip Code <b>45419-1510</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Waldo B. Lyon</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>1 Rolling Dr</b>		<b>Transaction ID: FF060601.0320054</b>	
City <b>Framingham</b>	State <b>MA</b>	Amount of Each Receipt this Period 80.00	
Zip Code <b>01701-3628</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 497.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	205.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 943 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George L. Mayer

Mailing Address 2 Andrews Rd

City State Zip Code  
Essex CT 06426-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Manhattan Realty Group Real Estate Salesman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 30 / 2006

Transaction ID: FF060601.0320056

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Willard C. Barbee

Mailing Address 378 Parkway Church Rd

City State Zip Code  
Morristown TN 37814-6423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 30 / 2006

Transaction ID: FF060601.0320069

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Calvin A. Knoke

Mailing Address 24 Riverside Dr

City State Zip Code  
Oak Ridge TN 37830-9012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 30 / 2006

Transaction ID: FF060601.0330038

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>325.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 944 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Donald E. Bissing		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 195 Brickleberry Dr		<b>Transaction ID:</b> FF060601.0330046	
City State Zip Code Roswell GA 30075-3069	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1106.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Patricia A. Martin		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address PO Box 1277		<b>Transaction ID:</b> FF060601.0330057	
City State Zip Code Lynnwood WA 98046-1250	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert G. Rohwer		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 1700 Hidden Oaks Dr		<b>Transaction ID:</b> FF060601.0340018	
City State Zip Code Stillwater OK 74074-1081	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 945 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Wilbur H. Durrance

Mailing Address 1272 Annandale Dr

City State Zip Code  
Clarkesville GA 30523-3094

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060601.0340032

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Tim A. Arenson

Mailing Address 6306 Falcon Ridge Ct

City State Zip Code  
Fort Collins CO 80525-9158

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060601.0340041

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rebecca S. Abbott

Mailing Address 5420 E Berneil Dr

City State Zip Code  
Paradise Valley AZ 85253-1653

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060601.0340046

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 275.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 946 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Janice Oeming		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 7160 Dutch Rd		<b>Transaction ID:</b> FF060601.0340051	
City Saginaw	State MI	Zip Code 48609-9579	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Barbara N. Foster		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 7015 Red Bug Lake Rd Apt 234		<b>Transaction ID:</b> FF060601.0350010	
City Oviedo	State FL	Zip Code 32765-5058	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harry G. Davis		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 8301 Tieton Dr Unit 18		<b>Transaction ID:</b> FF060601.0350013	
City Yakima	State WA	Zip Code 98908-1437	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	160.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 947 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William M. Snow, Jr.

Mailing Address 532 Northpark Dr

City State Zip Code  
Bossier City LA 71111-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 821.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: FF060601.0350039

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Franz J. Thiel

Mailing Address 1207 Seaway Dr

City State Zip Code  
Fort Pierce FL 34949-3147

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 402.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: FF060601.0380001

Amount of Each Receipt this Period  
51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peter A. Pervi

Mailing Address 1045 Rustling Oaks Dr

City State Zip Code  
Millersville MD 21108-2427

FEC ID number of contributing federal political committee. **C**

Name of Employer Locked Martin Occupation Program Mgr.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: FF060601.0440006

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>351.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 948 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Brenton L. Conrad

Mailing Address 5336 Elkhorn Rd

City State Zip Code  
Las Vegas NV 89131-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Werdco Bc Inc Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: FF060601.0450003

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey C. Newlin

Mailing Address PO Box 280

City State Zip Code  
Henryville IN 47126-0280

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bartlett Nuclear Radiological Control Technician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
336.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: FF060601.0470008

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Bobbie W. Powers

Mailing Address 4549 Wood River Dr

City State Zip Code  
Fairbanks AK 99709-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1478.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: FF060601.0470011

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 949 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Wallace E. Weber

Mailing Address 4473 W C 476

City State Zip Code  
Bushnell FL 33513-8525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Webco Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060601.0470013

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Alfred S. Warren, Jr.

Mailing Address 11 Stratford Pl

City State Zip Code  
Grosse Pointe MI 48230-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060601.0470017

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Ada Anderson-Strasenburgh

Mailing Address PO Box 608  
2370 R R 9

City State Zip Code  
Ocean View NJ 08230-0608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060601.0480001

Amount of Each Receipt this Period  
400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 950 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. J. D. Corwin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 133 21st Ave N		<b>Transaction ID:</b> FF060601.0500002	
City State Zip Code Texas City TX 77590-6008	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 701.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Joseph C. Dwyer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1616 W State St PO Box 648		<b>Transaction ID:</b> FF060601.0510002	
City State Zip Code Olean NY 14760-3355	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Trial Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. George C. Cady		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 10945 Kings Rd		<b>Transaction ID:</b> FF060601.0520002	
City State Zip Code Ventura CA 93004-1033	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 951 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jim Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 5409 Murfreesboro Rd		<b>Transaction ID:</b> FF060601.0520003	
City State Zip Code La Vergne TN 37086-2711	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Old West Guns	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Robert E. McGinnis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 19700 Hopewell Rd		<b>Transaction ID:</b> FF060601.0520006	
City State Zip Code Mount Vernon OH 43050-8514	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. R. M. Gordon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address Quaker Hollow Rd		<b>Transaction ID:</b> FF060601.0530001	
City State Zip Code Sewickley PA 15143	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gordon Termit Svc Co	Occupation Business Ex		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 952 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Stuart N. Banks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 4206 Brasher Dr		<b>Transaction ID:</b> FF060601.0530016	
City Birmingham	State AL	Zip Code 35243-1606	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Banks Home Building	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Lee E. Nowlin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 6807 E 83rd PI		<b>Transaction ID:</b> FF060601.0530024	
City Tulsa	State OK	Zip Code 74133-4108	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Vehicle Washing Systems Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Raymond J. Herriman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1937 Friendship Dr Ste F		<b>Transaction ID:</b> FF060601.0540017	
City El Cajon	State CA	Zip Code 92020-1137	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Arrow Imaging Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 953 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Joanne G. Wilson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 27 E Briar Hollow Ln		<b>Transaction ID:</b> FF060601.0540050	
City State Zip Code Houston TX 77027-2919	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer River Oaks Financial	Occupation Director / Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William A. Maddox		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 6320 Augusta Ave NW		<b>Transaction ID:</b> FF060601.0550021	
City State Zip Code Canton OH 44718-4019	Amount of Each Receipt this Period 103.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard T. Massey, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 8429 Pinewood Dr		<b>Transaction ID:</b> FF060601.0550037	
City State Zip Code Oklahoma City OK 73135-6176	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fema	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	253.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 954 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Belo N. Kellam, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 3737 Domestic Ave Ste 3		<b>Transaction ID:</b> FF060601.0550052	
City State Zip Code Naples FL 34104-3668	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Edna M. Dickson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 6340 E Bixby Hill Rd		<b>Transaction ID:</b> FF060601.0590003	
City State Zip Code Long Beach CA 90815-4704	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Sabuj Hossain		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1233 Broadway		<b>Transaction ID:</b> FF060601.0640003	
City State Zip Code New York NY 10001-4305	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Nuzhat Usa Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 955 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert E. Fluckey, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 1746 32nd Ave		<b>Transaction ID:</b> FF060601.0640052	
City State Zip Code San Francisco CA 94122-4102	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Layed Off	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Walter H. Blake		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 127 Heritage Dr # B1		<b>Transaction ID:</b> FF060601.0640074	
City State Zip Code Saint Simons Is GA 31522-2023	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Linda L. Alessio		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 6316 La Jolla Scenic Dr S		<b>Transaction ID:</b> FF060601.0690015	
City State Zip Code La Jolla CA 92037-6443	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	475.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 956 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Kennard B. Hays		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2227 New Milford Rd		<b>Transaction ID:</b> FF060601.0700057	
City State Zip Code Atwater OH 44201-9340	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. E. Marvin Johnson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 100		<b>Transaction ID:</b> FF060601.0700071	
City State Zip Code Raeford NC 28376-0100	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Poultry Farming & Processing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John N. Mortsakis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 60 E End Ave		<b>Transaction ID:</b> FF060601.0720067	
City State Zip Code New York NY 10028-7907	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer General Maritime Management	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	310.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 957 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Bonnie L. White Coon

Mailing Address PO Box 291

City State Zip Code  
Atmore AL 36504-0291

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: FF060601.0720080

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Walter H. Cobbs, Jr.

Mailing Address 216 Parkwood Ave

City State Zip Code  
Salem VA 24153-2106

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: FF060601.0720086

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Dorothy Webb

Mailing Address 13025 Sky Valley Rd

City State Zip Code  
Los Angeles CA 90049-1037

FEC ID number of contributing federal political committee. **C**

Name of Employer County Of L A Occupation Librarian

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: FF060601.0740029

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 958 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. John Mitas		Date of Receipt MM / DD / YYYY 05 / 31 / 2006
Mailing Address 3 Brandyridge Dr		<b>Transaction ID:</b> FF060601.0750026
City West Chester	State PA	Zip Code 19382-2368
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 200.00	
Name of Employer American College Of Physicians	Occupation Acp-chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. N. R. Pennypacker		Date of Receipt MM / DD / YYYY 05 / 31 / 2006
Mailing Address 915 Sorrel Ln		<b>Transaction ID:</b> FF060601.0770050
City Bryn Mawr	State PA	Zip Code 19010-1926
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 202.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Verna E. Bruss		Date of Receipt MM / DD / YYYY 05 / 31 / 2006
Mailing Address 2222 W Hayes St		<b>Transaction ID:</b> FF060601.0770077
City Woodburn	State OR	Zip Code 97071-3036
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	502.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 959 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Terrence Knicely		Date of Receipt MM / DD / YYYY 05 / 31 / 2006	
Mailing Address HC 68 Box 33		<b>Transaction ID:</b> FF060601.0830001	
City Friars Hill	State WV	Zip Code 24938-9705	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Knicely Machine Shop	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Terrence Knicely		Date of Receipt MM / DD / YYYY 05 / 31 / 2006	
Mailing Address HC 68 Box 33		<b>Transaction ID:</b> FF060601.0840002	
City Friars Hill	State WV	Zip Code 24938-9705	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Knicely Machine Shop	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Nicole Sauvola		Date of Receipt MM / DD / YYYY 05 / 31 / 2006	
Mailing Address 777 S Flagler Dr Ste 800 W Tower Phillips Point		<b>Transaction ID:</b> FF060601.0850001	
City West Palm Beach	State FL	Zip Code 33401-6161	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney General Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 960 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Douglas S. King</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 3309 Winthrop Ave Ste 78		<b>Transaction ID: FF060601.0850003</b>	
City State Zip Code Fort Worth TX 76116-5600	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Janlo Operating Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Trina Wheeler</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 1200 N White Swan Rd		<b>Transaction ID: FF060601.0850004</b>	
City State Zip Code White Swan WA 98952	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Delbert Wheeler Construct- ion	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. George Joseph</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 5055 Down Point Ln		<b>Transaction ID: FF060601.0850006</b>	
City State Zip Code Windermere FL 34786-8402	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 961 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Alireza Nyaiesh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 880204		<b>Transaction ID: FF060601.0850008</b>	
City San Francisco	State CA	Zip Code 94188-0204	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Charline Greer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 713 Albar Dr		<b>Transaction ID: FF060601.0850010</b>	
City Nashville	State TN	Zip Code 37221-2601	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Archie F. Warren</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 14 County Road 408		<b>Transaction ID: FF060601.0850011</b>	
City Corinth	State MS	Zip Code 38834-7706	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 962 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Eleanor Ray Harrison

Mailing Address 161 23rd St

City Hueytown State AL Zip Code 35023-2706

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Partnership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0850012

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Debra Obry

Mailing Address 8540 State Road 76

City Neenah State WI Zip Code 54956-9581

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0850014

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Eleuterio Perez

Mailing Address 6440 SW 117th Ave

City Miami State FL Zip Code 33183-2822

FEC ID number of contributing federal political committee. **C**

Name of Employer Ep Medical Equip. Pharmacy Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0850017

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 963 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jose Lala

Mailing Address 2930 Armour Ter

City State Zip Code  
Minneapolis MN 55418-2508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
La Guadalupana, Inc. Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: FF060601.0850019

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joyce Cooper Smith

Mailing Address 508 Laporte St SE

City State Zip Code  
Rome GA 30161-6243

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: FF060601.0860039

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Maxine Palmer

Mailing Address 19855 SW Touchmark Way  
Unit 104

City State Zip Code  
Bend OR 97702-1953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: FF060601.0930004

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 964 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George A. West

Mailing Address PO Box 2137

City Belle Glade State FL Zip Code 33430-7137

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0930006

Amount of Each Receipt this Period  
 65.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Arlo W. Turner

Mailing Address 4814 S 7th St

City Milwaukee State WI Zip Code 53221-2445

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 599.75

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0930008

Amount of Each Receipt this Period  
 40.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Marvin H. Schuett

Mailing Address PO Box 66  
Box 66

City Hustisford State WI Zip Code 53034-0066

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0930018

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	205.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 965 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Linda F. Hutchings

Mailing Address PO Box 895

City State Zip Code  
Soldotna AK 99669-0895

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Guacia Portiac Buick G.m-.c. Truck, In C.f.o.

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 501.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0960002

Amount of Each Receipt this Period  
201.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joe R. Ishizaki

Mailing Address 55 25th Ave

City State Zip Code  
San Francisco CA 94121-1104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 226.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0960007

Amount of Each Receipt this Period  
226.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gregory W. Ripley

Mailing Address 3 Luiz Ct

City State Zip Code  
San Rafael CA 94903-1099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rutherford And Chekene Financial Advisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 451.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0960008

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>528.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 966 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Judith A. Gitchel

Mailing Address 867 Sheffield Ct

City State Zip Code  
Nekoosa WI 54457-9198

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0970030

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
T. Cass Ballenger

Mailing Address PO Box 2029

City State Zip Code  
Hickory NC 28603-2029

FEC ID number of contributing federal political committee. **C**

Name of Employer Plastic Packaging Occupation Business Exec.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0970031

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ernest O. Hanson

Mailing Address PO Box 1927 Ste 300

City State Zip Code  
La Crosse WI 54602-1927

FEC ID number of contributing federal political committee. **C**

Name of Employer Hale, Skemp, Hanson, Skemp & Sleik Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.0980024

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 967 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David P. Ihle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 512 Francis Ave		<b>Transaction ID:</b> FF060601.0980026	
City Hudson	State WI	Zip Code 54016-8141	Amount of Each Receipt this Period 105.00
FEC ID number of contributing federal political committee. C			
Name of Employer National Business Systems Inc	Occupation C E O		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Paul J. Hamm		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 104 Charter Oaks Cir		<b>Transaction ID:</b> FF060601.0980040	
City Cary	State NC	Zip Code 27511-5574	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David Ford		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2208 Kewaunee Ct		<b>Transaction ID:</b> FF060601.1010017	
City Traverse City	State MI	Zip Code 49686-2000	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	255.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 968 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Jean C. Talmage		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1138 Devonshire Way		<b>Transaction ID:</b> FF060601.1010049	
City State Zip Code Palm Beach Gardens FL 33418-6863	Amount of Each Receipt this Period 450.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Calvin L. Thiele		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 309 W Jefferson St		<b>Transaction ID:</b> FF060601.1020009	
City State Zip Code Pittsfield IL 62363-1369	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joseph C. Zambito		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 715 Glossy Ibis Ln		<b>Transaction ID:</b> FF060601.1020028	
City State Zip Code Johns Island SC 29455-5903	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 969 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel B. Nail

Mailing Address 1140 Lighthouse Blvd

City State Zip Code  
Charleston SC 29412-8924

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 420.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.1020031

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James V. Heinz

Mailing Address 1304 Webster Forest Ct

City State Zip Code  
Saint Louis MO 63119-3936

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
St. Louis Food Ingredient- s, Inc. CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.1020043

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Elaine Denny

Mailing Address 2128 Summerville Ct

City State Zip Code  
Marietta GA 30062-2726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 246.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060601.1020072

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 220.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 970 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Uri Goldberg</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>4593 Golf Course Dr</b>		<b>Transaction ID: FF060601.1040001</b>	
City <b>Westlake Village</b>	State <b>CA</b>	Zip Code <b>91362-4359</b>	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation <b>Insurance Agent</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Temesgen M. Bitew</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>6905 Lillie Mae Way</b>		<b>Transaction ID: FF060601.1040004</b>	
City <b>Annandale</b>	State <b>VA</b>	Zip Code <b>22003-1882</b>	Amount of Each Receipt this Period 700.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation <b>Businessman</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Alexandra Schoepp</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address <b>10014 Dulaney Ct</b>		<b>Transaction ID: FF060602.0010001</b>	
City <b>Richmond</b>	State <b>VA</b>	Zip Code <b>23233-2047</b>	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>As Creative Team Inc.</b>	Occupation <b>President</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 971 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lindy Stevens

Mailing Address 10897 Woodleaf Ln

City State Zip Code  
Great Falls VA 22066-3003

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060602.0010002

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Marbury Little

Mailing Address 512 N Causeway Blvd

City State Zip Code  
Metairie LA 70001-5340

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060602.0010003

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Max Thompson

Mailing Address 6995 Union Park Ctr No. 300

City State Zip Code  
Midvale UT 84047-6047

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: FF060602.0010004

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 972 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Monty Newman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address PO Box 1122		<b>Transaction ID: FF060602.0010005</b>	
City Hobbs      State NM      Zip Code 88241-1122	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED      Occupation Realtor			
Receipt For:      Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		1000.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Nancy Hunt</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 111 Via Pico Plz		<b>Transaction ID: FF060602.0010006</b>	
City San Clemente      State CA      Zip Code 92672-3882	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED      Occupation INFO REQUESTED			
Receipt For:      Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		2000.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Roger Neal Jackson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 316 N Broad St		<b>Transaction ID: FF060602.0010007</b>	
City Monroe      State GA      Zip Code 30655-1806	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED      Occupation INFO REQUESTED			
Receipt For:      Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 973 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Saul Klein		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 5309 Fontaine St		<b>Transaction ID:</b> FF060602.0010008	
City State Zip Code San Diego CA 92120-1305	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Scott K. Rooth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address PO Box 2186		<b>Transaction ID:</b> FF060602.0010009	
City State Zip Code Cashiers NC 28717-2186	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation Realtor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Steve Hanleigh		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 1352 Lincoln Ave		<b>Transaction ID:</b> FF060602.0010010	
City State Zip Code San Jose CA 95125-3010	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 974 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Steven Goddard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 400 S Sepulveda Blvd No. 100		<b>Transaction ID: FF060602.0010011</b>	
City State Zip Code Manhattan Beach CA 90266-6814	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Wendy Furth</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 625 Baywood Ln Unit C		<b>Transaction ID: FF060602.0010012</b>	
City State Zip Code Simi Valley CA 93065-7665	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. M. Gail Bryne</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 105 Windermere Ave Ste 2		<b>Transaction ID: FF060602.0020001</b>	
City State Zip Code Ellington CT 06029-3858	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Brymill Corp Occupation President / Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 975 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Adorna Carroll

Mailing Address 23 Occhialini Ct

City State Zip Code  
Newington CT 06111-4754

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060602.0020002

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Ann Pettijohn

Mailing Address 2520 N Santiago Blvd Ste A

City State Zip Code  
Orange CA 92867-1831

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060602.0020003

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Aubrey Richardson

Mailing Address PO Box 12408

City State Zip Code  
Florence SC 29504-2408

FEC ID number of contributing federal political committee. **C**

Name of Employer Century 21 Richardson Realty Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060602.0020004

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 976 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Barbara B. Kennon</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 6915 Marina Cove Ct		<b>Transaction ID: FF060602.0020005</b>	
City State Zip Code Columbus GA 31904-2283	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Coldwell Banker Kennon, Parker, Dun	Occupation Real Estate Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Bill Martin</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 720 N Washington Ave		<b>Transaction ID: FF060602.0020006</b>	
City State Zip Code Lansing MI 48906-5133	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Bob C. Kulick</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 33 Old Mill Rd		<b>Transaction ID: FF060602.0020007</b>	
City State Zip Code Wilkes Barre PA 18702-7318	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 977 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Cynthia Shelton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address <b>622 E Washington St Ste 300</b>		<b>Transaction ID: FF060602.0020008</b>	
City <b>Orlando</b>	State <b>FL</b>	Amount of Each Receipt this Period 500.00	
Zip Code <b>32801-2972</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation <b>Realtor</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Diana L. Bull</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address <b>1715 State St</b>		<b>Transaction ID: FF060602.0020009</b>	
City <b>Santa Barbara</b>	State <b>CA</b>	Amount of Each Receipt this Period 1000.00	
Zip Code <b>93101-2521</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation <b>Realtor</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. George F. Peek</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address <b>9345 Lemmon Dr</b>		<b>Transaction ID: FF060602.0020010</b>	
City <b>Reno</b>	State <b>NV</b>	Amount of Each Receipt this Period 1500.00	
Zip Code <b>89506-9070</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Valley Realty Investments</b>		Occupation <b>Realtor</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 978 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Greg J. Pawlik

Mailing Address 15101 W Sunset Blvd

City State Zip Code  
Pacific Palisades CA 90272-3721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Coldwell Banker Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060602.0020011

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jack M. Woodcock

Mailing Address 7475 W Sahara Ave Ste 100

City State Zip Code  
Las Vegas NV 89117-2768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Americana Group Realtors Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060602.0020012

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James Dunham

Mailing Address 230 S Phillips Ave Ste 202

City State Zip Code  
Sioux Falls SD 57104-6321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060602.0020013

Amount of Each Receipt this Period  
1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 979 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Jeanne Radsick

Mailing Address 5121 Ming Ave

City Bakersfield State CA Zip Code 93309-4620

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: FF060602.0020014

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. W. James Johnston

Mailing Address PO Box 10

City Pocatello State ID Zip Code 83204-0010

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: FF060602.0020015

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joanne Levy

Mailing Address 8712 Carlitas Joy Ct

City Las Vegas State NV Zip Code 89117-3536

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: FF060602.0020016

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 980 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Joel Singer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 525 S Virgil Ave		<b>Transaction ID:</b> FF060602.0020017	
City State Zip Code Los Angeles CA 90020-1403	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED Occupation Realtor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Joyce Kristenson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 1725 E Washington Blvd		<b>Transaction ID:</b> FF060602.0020018	
City State Zip Code Pasadena CA 91104-2752	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Keith Kelley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 8225 W Sahara Ave Ste C		<b>Transaction ID:</b> FF060602.0020019	
City State Zip Code Las Vegas NV 89117-8929	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 981 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Edward K. Kane		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 205 E 22nd St Apt 2D		Transaction ID: FF060602.0030001
City State Zip Code New York NY 10010-4619	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Guardian Life	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Anthony J. Izzo		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 4301 Gulf Shore Blvd N Apt 1703		Transaction ID: FF060602.0040001
City State Zip Code Naples FL 34103-3482	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Nathan A. Lepper		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 308 Miracle Strip Pkwy SW Unit 26D		Transaction ID: FF060602.0040005
City State Zip Code Fort Walton Beach FL 32548-5243	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Lockheed Martin	Occupation Defense Contractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 982 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Glen L. Valencia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 28691 Malabar Rd		<b>Transaction ID:</b> FF060602.0060003	
City State Zip Code Trabuco Cyn CA 92679-1625	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Brothers Optical	Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Barjes F. Alotaibi		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 505 Wanda Ln		<b>Transaction ID:</b> FF060602.0090002	
City State Zip Code Pall Mall TN 38577-5028	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Aramco Service Co.	Occupation Fleet Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mark Rinna		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 6640 Shade Tree Way		<b>Transaction ID:</b> FF060602.0090006	
City State Zip Code Cumming GA 30040-8703	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rag, Inc.	Occupation Fast Food Store Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 983 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. E. J. Walton		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 9401 Central Ave NE		<b>Transaction ID:</b> FF060602.0090007	
City State Zip Code Albuquerque NM 87123-2613	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jay Walton Automotive, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Henry D. Cobb		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address PO Box 241367		<b>Transaction ID:</b> FF060602.0100001	
City State Zip Code Montgomery AL 36124-1367	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mmi - Fmsc	Occupation Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Wayne A. Elliott		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 670 Lower Poplar St		<b>Transaction ID:</b> FF060602.0100012	
City State Zip Code Macon GA 31201-3522	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Van Williams	Occupation Pres Sales/partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	475.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 984 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Theodore E. Davis</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 9974 Scripps Ranch Blvd # 207		<b>Transaction ID:</b> FF060602.0100021	
City San Diego	State CA	Zip Code 92131-1825	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Union Bank	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Willis E. Weikert, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 9744 Clover Heights Rd		<b>Transaction ID:</b> FF060602.0160003	
City Hagerstown	State MD	Zip Code 21740-9532	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fox & Associates, Inc.	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard M. Freiberg</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 80 Fuller Rd		<b>Transaction ID:</b> FF060602.0200001	
City Briarcliff Manor	State NY	Zip Code 10510-1328	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation CPA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 985 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Edna M. Dickson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 6340 E Bixby Hill Rd		<b>Transaction ID:</b> FF060602.0210001
City State Zip Code Long Beach CA 90815-4704	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Franz J. Thiel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 1207 Seaway Dr		<b>Transaction ID:</b> FF060602.0270035
City State Zip Code Fort Pierce FL 34949-3147	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 402.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Hugh M. Pierce		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 3209		<b>Transaction ID:</b> FF060602.0300001
City State Zip Code Palm Beach FL 33480-1409	Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4601.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	810.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 986 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Stuart G. Rice

Mailing Address 2300 Skyline Ranch Rd

City State Zip Code  
Rapid City SD 57701-8944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Spine Center at Rapid City Physician/Neurosurgeon

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: FF060602.0320001

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William R. Housholder

Mailing Address 1405 Strawberry Ln

City State Zip Code  
Johnson City TN 37604-7778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: FF060602.0330001

Amount of Each Receipt this Period  
205.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John K. Gaustad

Mailing Address 24912 Canyon Rim Pl

City State Zip Code  
Lake Forest CA 92630-3305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: FF060602.0340003

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1505.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 987 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roy W. Olsen

Mailing Address 6565 De Moss Dr  
Ste 107

City State Zip Code  
Houston TX 77074-5018

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060605.0630001

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Cloyce Talbott

Mailing Address 2600 Towle Park Rd

City State Zip Code  
Snyder TX 79549-5866

FEC ID number of contributing federal political committee. **C**

Name of Employer Patterson-Uti Energy, Inc. Occupation President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: FF060605.0630002

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John E. Wren

Mailing Address 2261 Northridge Avenue Cir

City State Zip Code  
Stillwater MN 55082-2506

FEC ID number of contributing federal political committee. **C**

Name of Employer Lakeville Motor Express Occupation President & C E O

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060605.0640001

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	12000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 988 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph P. Wren

Mailing Address 2975 Partridge Rd

City State Zip Code  
Saint Paul MN 55113-1119

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060605.0640002

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter F. Martin

Mailing Address 13239 Downey Trl

City State Zip Code  
Apple Valley MN 55124-5249

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060605.0640003

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John G. Lingerfeller

Mailing Address 1080 Riata Valley Rd

City State Zip Code  
Kingman AZ 86409-2942

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: FF060605.0640004

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 989 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. James W. Shepherd		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 507 Brookwood Blvd		<b>Transaction ID:</b> FF060605.0640005	
City Birmingham	State AL	Zip Code 35209-6801	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Shepherd Realty Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Dalton J. Woods		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 10405 Ellerbe Rd PO Box 65300		<b>Transaction ID:</b> FF060605.0650001	
City Shreveport	State LA	Zip Code 71136-5300	Amount of Each Receipt this Period 25000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael A. Del Duca		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 5770 Shirley St		<b>Transaction ID:</b> FF060605.0660003	
City Naples	State FL	Zip Code 34109-1814	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Naples Concrete & Masonry	Occupation Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	27900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 990 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Hubert White</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address PO Box 606		<b>Transaction ID: FF060605.0660004</b>	
City State Zip Code Covington GA 30015-0606	Amount of Each Receipt this Period 8333.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8333.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Krishna Kumar</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 718 W 12th St		<b>Transaction ID: FF060605.0660005</b>	
City State Zip Code Cookeville TN 38501-7788	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5100.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Elyce Rembos</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 311 N Monroe St		<b>Transaction ID: FF060605.0660006</b>	
City State Zip Code Hinsdale IL 60521-3148	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED Occupation INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	35833.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 991 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Vernon L. Simmons		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address PO Box 909		<b>Transaction ID:</b> FF060605.0660007	
City Crestview	State FL	Zip Code 32536-0909	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer Passport America	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Frank Bannister		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 610 Sundown Ln		<b>Transaction ID:</b> FF060605.0660008	
City Evergreen	State CO	Zip Code 80439-9612	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Western Oil & Gas Develop- ment	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Sven H. Jutz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 10791		<b>Transaction ID:</b> FF060605.0670001	
City Pompano Beach	State FL	Zip Code 33061-6791	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Self	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 992 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Gerd Miller

Mailing Address 105 Riviera Dr

City State Zip Code  
San Antonio TX 78213-3343

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060605.0670003

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John B. Kennelly

Mailing Address 333 E Key Palm Rd

City State Zip Code  
Boca Raton FL 33432-7925

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ultrasonic Sciences Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060605.0670004

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Wilhelmine E. Long

Mailing Address 1817 W Norwood St

City State Zip Code  
Chicago IL 60660-2311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
701.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: FF060605.0670006

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 993 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Frank B. Kelly		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1600 Forsyth St		<b>Transaction ID:</b> FF060605.0670007	
City State Zip Code Macon GA 31201-1408	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James L. Hubbard		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2275 Green Springs Hwy S		<b>Transaction ID:</b> FF060605.0670008	
City State Zip Code Birmingham AL 35205-6809	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hubbard Properties, Inc.	Occupation Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Thomas E. Reinhart		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 504 Country Club Ln		<b>Transaction ID:</b> FF060605.0670009	
City State Zip Code Onalaska WI 54650-8797	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 994 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Henry E. Autrey

Mailing Address 2201 Rosselle St

City State Zip Code  
Jacksonville FL 32204-3125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060605.0670010

Amount of Each Receipt this Period  
10000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles W. Faulkner

Mailing Address PO Box 37  
P.O. Box 7

City State Zip Code  
Mathews VA 23109-0037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Foster-faulkner Funeral Home Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060605.0680001

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Iqbal Akhter

Mailing Address 6758 N Leroy Ave

City State Zip Code  
Lincolnwood IL 60712-3204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Prevention & Treatment Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: FF060605.0690001

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	13000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 995 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Margaret George		Date of Receipt MM / DD / YYYY 05 / 30 / 2006	
Mailing Address 2282 Golden Gate Ave		<b>Transaction ID:</b> FF060605.0690002	
City State Zip Code San Francisco CA 94118-4327	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Ken Sleveland		Date of Receipt MM / DD / YYYY 05 / 30 / 2006	
Mailing Address 11424 Jovita Blvd E		<b>Transaction ID:</b> FF060605.0690003	
City State Zip Code Edgewood WA 98372-1262	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Alltech Electric Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4675.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Mary M. Martin		Date of Receipt MM / DD / YYYY 05 / 30 / 2006	
Mailing Address 1111 Tahoe Ter		<b>Transaction ID:</b> FF060605.0690004	
City State Zip Code Cincinnati OH 45238-4150	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 996 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Kevin K. Kea</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>735 Bishop St Ste 330</b>		<b>Transaction ID: FF060605.0690005</b>	
City <b>Honolulu</b>	State <b>HI</b>	Amount of Each Receipt this Period 5000.00	
Zip Code <b>96813-4823</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Ace Land Surveying Llc</b>	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Clarence Frierson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>10985 Harts Island Rd</b>		<b>Transaction ID: FF060605.0690006</b>	
City <b>Shreveport</b>	State <b>LA</b>	Amount of Each Receipt this Period 500.00	
Zip Code <b>71115-9579</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>INFO REQUESTED</b>	Occupation <b>INFO REQUESTED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Alice L. Walton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address <b>10587 S Highway 281</b>		<b>Transaction ID: FF060605.0700001</b>	
City <b>Mineral Wells</b>	State <b>TX</b>	Amount of Each Receipt this Period 25000.00	
Zip Code <b>76067-0951</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>INFO REQUESTED</b>	Occupation <b>INFO REQUESTED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	30500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 997 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael F. Chappell

Mailing Address 7732 Asterella Ct

City State Zip Code  
Springfield VA 22152-3141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fierce Isakowitz & Blalock Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2006

Transaction ID: FF060605.0700002

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Scott Reed

Mailing Address 17 Bay Dr

City State Zip Code  
Annapolis MD 21403-4510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Chesapeake Enterprises Lobbyist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2006

Transaction ID: FF060605.0700003

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edward D. Edwards

Mailing Address 2410 35th St

City State Zip Code  
Port Townsend WA 98368-4733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2006

Transaction ID: FF060605.0700004

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 998 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Garrett M. Baker		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 175 W 12th St Apt 5M		<b>Transaction ID:</b> FF060605.0700005	
City State Zip Code New York NY 10011-8214	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INFO REQUESTED INFO REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Edward D. Edwards		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2410 35th St		<b>Transaction ID:</b> FF060605.0700006	
City State Zip Code Port Townsend WA 98368-4733	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Rita R. White		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 59 W Rock Hill Rd		<b>Transaction ID:</b> IE060501.0010001	
City State Zip Code Bala Cynwyd PA 19004-2010	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Merion Memorial Park Inc. President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 999 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Morton P. Israel

Mailing Address 770 Magnolia Ave Ste 1X

City State Zip Code  
Corona CA 92879-3122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Morton P Israel MD Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010003

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Rob J. Wallace

Mailing Address 16080 Hidden Valley Rd

City State Zip Code  
Sonora CA 95370-9132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Suntech Solar Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010004

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark M. Thurston

Mailing Address 10440 Little Patuxent Pkwy Ste 900

City State Zip Code  
Columbia MD 21044-3426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dominion Home Loans Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010005

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1000 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Donald Burch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 3968 Duke Ln		<b>Transaction ID:</b> IE060501.0010006	
City State Zip Code Lake Havasu City AZ 86404-1743	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Burch Masonry Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Rose J. Spano		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 2745 E Atlantic Blvd		<b>Transaction ID:</b> IE060501.0010009	
City State Zip Code Pompano Beach FL 33062-4952	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rose J Spano Pa	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Christina Mendez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1834B NE Miami Gardens Dr		<b>Transaction ID:</b> IE060501.0010012	
City State Zip Code Miami FL 33179-5036	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hello Cellular	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1375.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1001 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Peter N. Toscano

Mailing Address 950 Celebration Blvd Ste A  
Ste A

City State Zip Code  
Kissimmee FL 34747-4452

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Intl. Power Group Ltd. CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

**Transaction ID:** IE060501.0010014

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Carolyn M. Young

Mailing Address 3031 F St Ste 203

City State Zip Code  
Sacramento CA 95816-3844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Carolyn M Young Fiduciary Services Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

**Transaction ID:** IE060501.0010017

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Patrick Rodrigues

Mailing Address 1600 Crotona Park E

City State Zip Code  
Bronx NY 10460-4879

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Tremont-Crotona Day Care Center, Inc. Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

**Transaction ID:** IE060501.0010020

Amount of Each Receipt this Period  
700.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1700.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1002 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David I. Reed

Mailing Address 413 Oolitic Rd

City Bedford State IN Zip Code 47421-1620

FEC ID number of contributing federal political committee. **C**

Name of Employer Oolitic Rd. Auto Service Center Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: IE060501.0010022

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Nabeel D. Aldeir

Mailing Address 1712 Calumet Ave

City Whiting State IN Zip Code 46394-1415

FEC ID number of contributing federal political committee. **C**

Name of Employer Wireless One 2 3 Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: IE060501.0010024

Amount of Each Receipt this Period  
600.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David G. Roberts

Mailing Address 3105 Barkley Ave

City Midland State TX Zip Code 79701-6215

FEC ID number of contributing federal political committee. **C**

Name of Employer Pb Diamond Developers Inc. Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 01 / 2006

Transaction ID: IE060501.0010025

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1003 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Christina A. Roehl

Mailing Address 2051 Rosa Parks Blvd

City State Zip Code  
Detroit MI 48216-1556

FEC ID number of contributing federal political committee. **C**

Name of Employer Search Services, Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010026

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Corey J. Wapelhorst

Mailing Address 1051 US Highway 22

City State Zip Code  
Lebanon NJ 08833-4211

FEC ID number of contributing federal political committee. **C**

Name of Employer Chelseas Restaraunt Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010029

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Alex Lightman

Mailing Address 1431 Ocean Ave Ste 600

City State Zip Code  
Santa Monica CA 90401-2128

FEC ID number of contributing federal political committee. **C**

Name of Employer Innofone.com Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010030

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1004 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Limone

Mailing Address 1102 Sussex Tpke

City State Zip Code  
Randolph NJ 07869-4224

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Daniel Limone Painting and Restoration

Occupation  
INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: IE060501.0010031

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Leo Chaffin

Mailing Address 540 W Plumb Ln Ste 1B

City State Zip Code  
Reno NV 89509-3691

FEC ID number of contributing federal political committee. **C**

Name of Employer  
C & A Home Loans

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: IE060501.0010032

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Kali P. Chaudhuri

Mailing Address 6800 Indiana Ave Ste 130

City State Zip Code  
Riverside CA 92506-4266

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Strategic Global Mgmt.

Occupation  
Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: IE060501.0010041

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1005 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Laurie L. Bracelin</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 135 E Main St		<b>Transaction ID:</b> IE060501.0010045	
City State Zip Code New Holland PA 17557-1275	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Millennium Insurance Group Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Chris Fetcho</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 163 Linnwood Rd		<b>Transaction ID:</b> IE060501.0010046	
City State Zip Code Eighty Four PA 15330-2918	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Bolsan Co. Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Lee Bermingham</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 3330 S Crater Rd		<b>Transaction ID:</b> IE060501.0010049	
City State Zip Code Petersburg VA 23805-9277	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Lees Fashions	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1006 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William R. Winkler

Mailing Address PO Box 87

City State Zip Code  
Belmar NJ 07719-0087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
E S W Enterprises Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010050

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jay Kim

Mailing Address 9728 Albutis Ave

City State Zip Code  
Santa Fe Springs CA 90670-3206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Tornado Air Mgmt. Systems President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010052

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Tony Hardister

Mailing Address 6290 Edgewater Dr

City State Zip Code  
Orlando FL 32810-4750

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
National Association of Credit Managem President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010053

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1007 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Missy Tanner

Mailing Address 6701 W 12th St Ste 7A

City State Zip Code  
Little Rock AR 72204-1556

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm Insurance Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010054

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Matthew R. Valentine

Mailing Address 10 Diagonal St Ste 201

City State Zip Code  
Saint George UT 84770-2817

FEC ID number of contributing federal political committee. **C**

Name of Employer Matthew R Valentine DDS, PC Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010055

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peitier T. Van Der Heyden

Mailing Address 1141 E Louisa Ave

City State Zip Code  
West Covina CA 91790-1347

FEC ID number of contributing federal political committee. **C**

Name of Employer P and E Corp. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010059

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1008 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. E. Johnson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 5602 Land O Lakes Blvd		<b>Transaction ID:</b> IE060501.0010062	
City State Zip Code Land O Lakes FL 34639-3417	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Eves Gardens Inc.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Marie Brudent		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1036 N Broad St		<b>Transaction ID:</b> IE060501.0010063	
City State Zip Code Hillside NJ 07205-2840	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Concern Mom Corp.	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William J. Mason		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 314 Badiola St		<b>Transaction ID:</b> IE060501.0010066	
City State Zip Code Caldwell ID 83605-4389	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mason and Stanfield Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1009 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Karmen Dupree		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO Box 1054		<b>Transaction ID:</b> IE060501.0010070	
City Georgetown	State TX	Amount of Each Receipt this Period 500.00	
Zip Code 78627-1054			
FEC ID number of contributing federal political committee. C			
Name of Employer Olde Town Gifts	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Marie Rampino		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 5315 64th St		<b>Transaction ID:</b> IE060501.0010074	
City Maspeth	State NY	Amount of Each Receipt this Period 500.00	
Zip Code 11378-1635			
FEC ID number of contributing federal political committee. C			
Name of Employer Marie Rampino	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Betsy H. Griner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 501 Church St NE Ste 109		<b>Transaction ID:</b> IE060501.0010078	
City Vienna	State VA	Amount of Each Receipt this Period 500.00	
Zip Code 22180-4734			
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Headhunter		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1010 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Zeki I. Omar		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 4700 Barnsleigh Dr		<b>Transaction ID:</b> IE060501.0010079	
City Akron      State OH      Zip Code 44333-1658	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Omar Corp.      Occupation President	Aggregate Year-to-Date ▼ 700.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Darlene M. Horine		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 908 Belvedere Dr		<b>Transaction ID:</b> IE060501.0010081	
City Kokomo      State IN      Zip Code 46901-8609	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Galaxy Spas & Pools      Occupation Owner	Aggregate Year-to-Date ▼ 3500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David C. Allen		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 12403 Cumming Hwy		<b>Transaction ID:</b> IE060501.0010082	
City Canton      State GA      Zip Code 30115-7553	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Allen Allstate Agency      Occupation Owner	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1011 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ron M. White, Sr.

Mailing Address 17476 Mill Hill Rd

City State Zip Code  
Garfield AR 72732-9521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
White House Paint & Quarter Ranch LLC Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

Transaction ID: IE060501.0010083

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David L. Rieke

Mailing Address 71 Broadway

City State Zip Code  
Amherst NH 03031-1814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ocean Breeze Surgical LLC CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

Transaction ID: IE060501.0010084

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Joann Perrella

Mailing Address 6374 Schomburg Rd

City State Zip Code  
Columbus GA 31909-4176

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Columbus Veterinary Medical Center Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

Transaction ID: IE060501.0010087

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1012 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Theresa Malone</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 300 W Osborn Rd Ste 110		<b>Transaction ID:</b> IE060501.0010088	
City Phoenix	State AZ	Zip Code 85013-3922	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer TCM Mortgage Group Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. David E. Hardge</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 259 Lee Road 587		<b>Transaction ID:</b> IE060501.0010090	
City Smiths	State AL	Zip Code 36877-3517	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer D A T Trucking Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Tapan Thakur</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 401 Southcrest Cir		<b>Transaction ID:</b> IE060501.0010091	
City Southaven	State MS	Zip Code 38671-6726	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Internal Medicine Physi- cians	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1013 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Charles Toledo		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 2403 Navy Dr		<b>Transaction ID:</b> IE060501.0010092	
City State Zip Code Stockton CA 95206-1146	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer C & R Intl. Sales	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Robert J. Jordan		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 13809 N Hwy 183 Ste 715		<b>Transaction ID:</b> IE060501.0010094	
City State Zip Code Austin TX 78750-1179	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Robert J Jordan DDS	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Tom Ehrbriht		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 8122 Oak Narrows Rd		<b>Transaction ID:</b> IE060501.0010095	
City State Zip Code Cook MN 55723-8719	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Disability Specialists In- c.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1014 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Kay Dunn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 204 Indian Trace Ln		<b>Transaction ID:</b> IE060501.0010096	
City State Zip Code Waxahachie TX 75165-1535	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Better Life Technologies	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Stella M. Kitzenberg</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 3939 W 50th St Ste 201		<b>Transaction ID:</b> IE060501.0010098	
City State Zip Code Edina MN 55424-1258	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kitzenberg Stella M DDS MS Pa	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Elie H. Korban</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 9486 Highway 412 W		<b>Transaction ID:</b> IE060501.0010099	
City State Zip Code Lexington TN 38351-5713	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Delta Convenient Care	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1015 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jason M. Williams		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 514 Walnut St Rear		Transaction ID: IE060501.0010101	
City State Zip Code Danville PA 17821-1754	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Williams Excavation	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Paul G. Lewis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 18765 County Road 20		Transaction ID: IE060501.0010104	
City State Zip Code Goshen IN 46528-6716	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lewis Tools Sales Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Charles Moody		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 2218 Littlejohn Trl		Transaction ID: IE060501.0010105	
City State Zip Code Newton NC 28658-7410	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer C E M Associates Inc.	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1016 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Shirley Dowling</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 512 S 5th St		<b>Transaction ID: IE060501.0010106</b>	
City State Zip Code Hamilton MT 59840-2752	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Northwest Ranch and Land Inc.	Occupation Real Estate Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Jeane Best</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 62 Lasalle Rd Ste 212		<b>Transaction ID: IE060501.0010110</b>	
City State Zip Code West Hartford CT 06107-2306	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jeane Best DDS	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Sandra G. Cain</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address PO Box 187 225 W Broad St		<b>Transaction ID: IE060501.0010113</b>	
City State Zip Code Saint Pauls NC 28384-1533	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer St. Pauls Insurance Agency	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1017 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Cynthia Schmitt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 8651 Riebel Rd		<b>Transaction ID:</b> IE060501.0010116	
City State Zip Code Galloway OH 43119-9737	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CSW Farms	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Darlene Krause		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 261 E Palmetto Park Rd		<b>Transaction ID:</b> IE060501.0010117	
City State Zip Code Boca Raton FL 33432-5013	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sun Title of South Florida	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Constance Bell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 39 NE 44th St		<b>Transaction ID:</b> IE060501.0010118	
City State Zip Code Oakland Park FL 33334-1437	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Aargo Insurance Group	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1018 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Dianne M. Jones

Mailing Address 5511 Roaring Branch Rd

City Columbus State GA Zip Code 31904-2829

FEC ID number of contributing federal political committee. **C**

Name of Employer Professional Counselling Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 6

Transaction ID: IE060501.0010121

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Jo Hilbrand

Mailing Address 9909 Willow Ave

City Grant State MI Zip Code 49327-9304

FEC ID number of contributing federal political committee. **C**

Name of Employer Hilbrand Tax and Accounting Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 6

Transaction ID: IE060501.0010122

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Karen Lawson

Mailing Address 16503 Booker T Washington Hwy

City Moneta State VA Zip Code 24121-5763

FEC ID number of contributing federal political committee. **C**

Name of Employer at The Lake Vacation Rentals Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 6

Transaction ID: IE060501.0010123

Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1019 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Walker

Mailing Address 784 Highway 163

City State Zip Code  
Calhoun TN 37309-5278

FEC ID number of contributing federal political committee. **C**

Name of Employer Walker Auto Sales Service  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: IE060501.0010127

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Scott Babino

Mailing Address 67 N Burbank Dr

City State Zip Code  
Montgomery AL 36117-5303

FEC ID number of contributing federal political committee. **C**

Name of Employer Al's Package Store  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: IE060501.0010128

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Bob Darling

Mailing Address 14050 Saint George Ct

City State Zip Code  
Elm Grove WI 53122-2160

FEC ID number of contributing federal political committee. **C**

Name of Employer Pressed Steel Tank Co. In-  
c.  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: IE060501.0010130

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1020 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Richard M. Siebold		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 6200 Wilshire Blvd		<b>Transaction ID:</b> IE060501.0010132	
City State Zip Code Los Angeles CA 90048-5801	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Richard M Siebold MD	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jim Porter		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 3928 NE Sequoia St		<b>Transaction ID:</b> IE060501.0010135	
City State Zip Code Lees Summit MO 64064-1575	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Worldwide Ticket	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Alexander Lambert		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 235 Commercial Ave		<b>Transaction ID:</b> IE060501.0010138	
City State Zip Code Palisades Park NJ 07650-1109	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N A C Foods Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1021 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Rick Harkleroad</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1748 W Broadway Ave		<b>Transaction ID:</b> IE060501.0010139	
City State Zip Code Maryville TN 37801-5510	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pro. Care Tire and Service Center Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael J. Miller</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 123 W Main St		<b>Transaction ID:</b> IE060501.0010140	
City State Zip Code Barrington IL 60010-4371	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mj Miller Comany Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Bob W. Caudill</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 103 Industrial Way		<b>Transaction ID:</b> IE060501.0010141	
City State Zip Code Charlestown IN 47111-1246	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer C-Way Tool and Die Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1022 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steve B. Goldberg

Mailing Address 40 1st St NW

City State Zip Code  
Carmel IN 46032-1702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SBG Design Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

Transaction ID: IE060501.0010142

Amount of Each Receipt this Period  
175.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Debra A. Sullivan

Mailing Address 1304 W Alabama St

City State Zip Code  
Houston TX 77006-4206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jackson's Place Dog Daycare Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

Transaction ID: IE060501.0010145

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gerardo Alaniz

Mailing Address 3200 E Expressway 83

City State Zip Code  
Donna TX 78537-2977

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RGV Texas Autofraders Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

Transaction ID: IE060501.0010147

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 475.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1023 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Randy King		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 125 E Park Row Dr		<b>Transaction ID:</b> IE060501.0010148	
City Arlington	State TX	Zip Code 76010-4426	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer R H King Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ronald E. Gamble		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 11235 Tall Trees Dr		<b>Transaction ID:</b> IE060501.0010149	
City Fishers	State IN	Zip Code 46038-4650	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer R & K Trucking LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Heather J. Hesse		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 683 Keeneland Pike		<b>Transaction ID:</b> IE060501.0010150	
City Lake Mary	State FL	Zip Code 32746-3952	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Elan Spa Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1024 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Roderick J. Lloyd</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 110 E Broward Blvd Ste 1700		<b>Transaction ID: IE060501.0010152</b>	
City State Zip Code Fort Lauderdale FL 33301-3500	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Loyd Benton & Taylor Llc	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Clare M. Vickery</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 49 N Federal Hwy		<b>Transaction ID: IE060501.0010153</b>	
City State Zip Code Dania Beach FL 33004-2801	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Grace Cafe & Galleries	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas H. Tierney</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 129 E 284th St		<b>Transaction ID: IE060501.0010154</b>	
City State Zip Code Willowick OH 44095-4558	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Acclivity Mktg. & Business	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1025 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William J. Asewicz

Mailing Address 23269 State Road 7

City State Zip Code  
Boca Raton FL 33428-5449

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Best Spa Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: IE060501.0010155

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Glen Osborn

Mailing Address 520D S Auburn St

City State Zip Code  
Colfax CA 95713-9038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Osborn General Engineering & Construct President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: IE060501.0010157

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Platt

Mailing Address 8701 Highland Ave

City State Zip Code  
Mineral Ridge OH 44440-9779

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
American Way Manufacturing Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2006

Transaction ID: IE060501.0010161

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1026 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Kelly R. Dittmer

Mailing Address PO Box 64

City State Zip Code  
Lacona IA 50139-0064

FEC ID number of contributing federal political committee. **C**

Name of Employer Seams Perfect Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010162

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Sam Said

Mailing Address 4111 Crimson Oak Ct

City State Zip Code  
Houston TX 77059-3033

FEC ID number of contributing federal political committee. **C**

Name of Employer Budget Collision Inc. Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010163

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Randy L. Perry

Mailing Address PO Box 988

City State Zip Code  
Luling TX 78648-0988

FEC ID number of contributing federal political committee. **C**

Name of Employer Durof Western Manufacturing Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010164

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1027 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Christopher D. Pratt

Mailing Address 5314 3rd St

City Irwindale State CA Zip Code 91706-2060

FEC ID number of contributing federal political committee. **C**

Name of Employer Candywarehouse.com Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	0	6

Transaction ID: IE060501.0010165

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Dick Bartolomeo

Mailing Address 120 Old Oak Rd

City Bridgeville State PA Zip Code 15017-1248

FEC ID number of contributing federal political committee. **C**

Name of Employer Clearwater-FJB & Associates Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	0	6

Transaction ID: IE060501.0010166

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Terry Cortright

Mailing Address 3870 Rosin Ct Ste 100

City Sacramento State CA Zip Code 95834-1648

FEC ID number of contributing federal political committee. **C**

Name of Employer FIS Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	0	6

Transaction ID: IE060501.0010167

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1028 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jack Johnson

Mailing Address 815 W Pine St

City State Zip Code  
Columbus KS 66725-1548

FEC ID number of contributing federal political committee. C

Name of Employer Johnson Agri-Trucking      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

**Transaction ID:** IE060501.0010169

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Dale Roo

Mailing Address 259 Dairy Dr

City State Zip Code  
Kalispell MT 59901-2169

FEC ID number of contributing federal political committee. C

Name of Employer Edr Financial      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      800.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

**Transaction ID:** IE060501.0010170

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steve M. Mihm

Mailing Address 16584 Klamath Ter

City State Zip Code  
Lakeville MN 55044-8425

FEC ID number of contributing federal political committee. C

Name of Employer Kingsley Cove Marketing      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

**Transaction ID:** IE060501.0010171

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 800.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1029 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. James M. Tousignant		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 3501 W Vine St Ste 225		Transaction ID: IE060501.0010172	
City State Zip Code Kissimmee FL 34741-4643	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Castlerock Partners Llc	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. George J. Magovern		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 251 Old Mill Rd		Transaction ID: IE060501.0010175	
City State Zip Code Pittsburgh PA 15238-1939	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer George Magovern Md	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John T. Lorick, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 20206 Piedra Chica Rd		Transaction ID: IE060501.0010177	
City State Zip Code Malibu CA 90265-5328	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer John T. Lorick, Consultant	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1030 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Fredrick P. Wilson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1305 Rollins St		<b>Transaction ID:</b> IE060501.0010178	
City State Zip Code Grand Blanc MI 48439-5119	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Del Fiy	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1450.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Rosalie Gastineau		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 2890 Jadestone Ave		<b>Transaction ID:</b> IE060501.0010184	
City State Zip Code Simi Valley CA 93063-2148	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rosalie's School Of Dance	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Robert Passmore		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 9701 SW 72nd St		<b>Transaction ID:</b> IE060501.0010185	
City State Zip Code Miami FL 33173-4615	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sunset Oil	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1031 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Sarbjit Johl

Mailing Address 9244 State Highway 70

City State Zip Code  
Marysville CA 95901-3065

FEC ID number of contributing federal political committee. C

Name of Employer Sarbjit Johl Farms      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

**Transaction ID:** IE060501.0010186

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bruce J. Belschner

Mailing Address 28-38 Cordier St

City State Zip Code  
Irvington NJ 07111-4053

FEC ID number of contributing federal political committee. C

Name of Employer F A Pratt Inc      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

**Transaction ID:** IE060501.0010187

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Letty Hudson

Mailing Address PO Box 697

City State Zip Code  
Franklin Park IL 60131-0697

FEC ID number of contributing federal political committee. C

Name of Employer Chicago Minibus Travel In-  
c.      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 6

**Transaction ID:** IE060501.0010188

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1000.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1032 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Ben Moseley		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 931 15th St NE		<b>Transaction ID:</b> IE060501.0010189	
City Hickory	State NC	Amount of Each Receipt this Period 250.00	
Zip Code 28601-4157		FEC ID number of contributing federal political committee. C	
Name of Employer Heritage Insurance	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Elizabeth H. Fuller		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 1120 5th Ave		<b>Transaction ID:</b> IE060501.0010190	
City New York	State NY	Amount of Each Receipt this Period 300.00	
Zip Code 10128-0144		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Colleen Zona		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 20 Augur St		<b>Transaction ID:</b> IE060501.0010193	
City Hamden	State CT	Amount of Each Receipt this Period 150.00	
Zip Code 06517-3435		FEC ID number of contributing federal political committee. C	
Name of Employer Sunshine Preschool	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1033 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Janet Bieri

Mailing Address 20724 State St

City State Zip Code  
Onaway MI 49765-8665

FEC ID number of contributing federal political committee. **C**

Name of Employer: Great Lakes Medical Care Inc. Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010194

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Gloria Brogan, Ph.D

Mailing Address 1305 Middle Country Rd

City State Zip Code  
Selden NY 11784-2554

FEC ID number of contributing federal political committee. **C**

Name of Employer: Neuro Data Inc Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010196

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Dorothy R. Shupe

Mailing Address 2454 E Southern Ave Ste 110

City State Zip Code  
Mesa AZ 85204-5417

FEC ID number of contributing federal political committee. **C**

Name of Employer: Dreamcatchers Planning & Design LLC Occupation: Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010197

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1034 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Herbert L. Mitchell, III		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 230 W Academy St		<b>Transaction ID:</b> IE060501.0010199	
City State Zip Code Asheboro NC 27203-5652	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sedgefield Global Corp.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William Kinsella		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 124 Court St Ste 5		<b>Transaction ID:</b> IE060501.0010203	
City State Zip Code Middletown CT 06457-3333	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gateway Mortgage Services LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mark Evans		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2006	
Mailing Address 715 Almond St		<b>Transaction ID:</b> IE060501.0010204	
City State Zip Code Clermont FL 34711-3123	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Brooke Franchise Corp.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1035 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark A. Clark

Mailing Address 4184 Lisieux Ln

City State Zip Code  
Saint Louis MO 63129-3459

FEC ID number of contributing federal political committee. **C**

Name of Employer C & W Sports LLC Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010205

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. R. Parrish

Mailing Address 395 Sleepy Woods Rd

City State Zip Code  
Cross Junction VA 22625-1658

FEC ID number of contributing federal political committee. **C**

Name of Employer R David Parrish Electrical Services Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010208

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Tricia J. Pallak

Mailing Address 13500 Tamiami Trl N Ste 5

City State Zip Code  
Naples FL 34110-6332

FEC ID number of contributing federal political committee. **C**

Name of Employer The Wood Floor Co. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010213

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1036 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Eduardo Canas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 3460 Wilshire Blvd # 1116		<b>Transaction ID:</b> IE060501.0010219	
City State Zip Code Los Angeles CA 90010-2206	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Diamond Group Funding	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Miss Diana Corcoran</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 407 Main St		<b>Transaction ID:</b> IE060501.0010222	
City State Zip Code Rindge NH 03461-5729	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Trans.-Aero	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Alina Chong</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 8810 Cameron Crest Dr		<b>Transaction ID:</b> IE060501.0010224	
City State Zip Code Tampa FL 33626-4712	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ali Cat Investments LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1037 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Jimmy Bass</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 801 Washington Ave Ste 302		Transaction ID: IE060501.0010225
City State Zip Code Waco TX 76701-1260	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Bass Mktg. Consultants	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Tara A. Evans</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 5005 Colina Way		Transaction ID: IE060501.0010230
City State Zip Code Sierra Vista AZ 85635-5709	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer M T E Enterprises	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Melissa C. Powell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 18 E Avenue A		Transaction ID: IE060501.0010231
City State Zip Code Temple TX 76501-7620	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Temple Belton Properties	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1038 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Patrick J. Kelly

Mailing Address 188 Kearny Ave Ste A

City State Zip Code  
Kearny NJ 07032-2438

FEC ID number of contributing federal political committee. **C**

Name of Employer: Kelly Shipping, Llc  
Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010235

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lui G. Damasceno

Mailing Address 10430 Nancy Dr

City State Zip Code  
Meadville PA 16335-6328

FEC ID number of contributing federal political committee. **C**

Name of Employer: The Brooks Group  
Occupation: Business Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010236

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Nick Enriquez

Mailing Address 8787 Complex Dr Ste 400

City State Zip Code  
San Diego CA 92123-1453

FEC ID number of contributing federal political committee. **C**

Name of Employer: Integrits Corp.  
Occupation: Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: IE060501.0010238

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1039 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Charles Kellerman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 641 E Ohio Pike		<b>Transaction ID:</b> IE060501.0010242	
City State Zip Code Amelia OH 45102-2000	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Eagle Rv Moldings, Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ernest Tyvaert		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 34550 26 Mile Rd		<b>Transaction ID:</b> IE060502.0010001	
City State Zip Code Chesterfield MI 48051-1414	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Shoreline Steel	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. T.Scott Allen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 911 Osler Dr Ste D		<b>Transaction ID:</b> IE060502.0010002	
City State Zip Code Jonesboro AR 72401-4320	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer T.Scott Allen DDS, MS, PC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1040 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Janet Summerton		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 3501 W Vine St Ste 523		<b>Transaction ID:</b> IE060502.0010005	
City State Zip Code Kissimmee FL 34741-4601	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer First American Real Estate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Richard A. Musco Ph.D.		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 2123 E Southern Ave Ste 2		<b>Transaction ID:</b> IE060502.0010009	
City State Zip Code Tempe AZ 85282-7531	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Center For Behavioral Health	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Linda S. Hodges		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 8649 Baypine Rd Ste 100		<b>Transaction ID:</b> IE060502.0010010	
City State Zip Code Jacksonville FL 32256-7574	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer North Florida Financial Corp.	Occupation Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1041 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Hutton

Mailing Address 3131 NW Loop 410  
Ste 200

City San Antonio State TX Zip Code 78230-5147

FEC ID number of contributing federal political committee. **C**

Name of Employer The Hutton Co. Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010011

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Charlene Long

Mailing Address 1332 E 3300 S

City Salt Lake City State UT Zip Code 84106-3012

FEC ID number of contributing federal political committee. **C**

Name of Employer Charlene Long Insurance Agency Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010012

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Toni Nadal

Mailing Address PO Box 250

City Fort Walton Beach State FL Zip Code 32549-0250

FEC ID number of contributing federal political committee. **C**

Name of Employer Family Life Center Ministries Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010013

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1042 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Susan E. Halstead		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 205 Lake Ave		<b>Transaction ID:</b> IE060502.0010014	
City State Zip Code Saratoga Springs NY 12866-2628	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Family Vision Care Center LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Y. Zadoorian		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 3159 Los Olivos Ln		<b>Transaction ID:</b> IE060502.0010015	
City State Zip Code La Crescenta CA 91214-2733	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Yz Plumbing Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Doris E. Andersen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address PO Box 1546 2700 Pioneer Rd		<b>Transaction ID:</b> IE060502.0010020	
City State Zip Code Medford OR 97501-9642	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Doris Andersen & Associates	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1043 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Nancy Lenhart

Mailing Address 176 C Ave

City State Zip Code  
Coronado CA 92118-1420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Camp Lajolla CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010021

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Marian Brinker

Mailing Address 11606 S Western Ave

City State Zip Code  
Chicago IL 60643-4730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Family Care Gentle Dental Center Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010022

Amount of Each Receipt this Period  
600.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jose Reyes

Mailing Address 3 Randolph Ct

City State Zip Code  
Newtown PA 18940-1852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jji Technology LLC President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010030

Amount of Each Receipt this Period  
325.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1425.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1044 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Diana L. Popson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 92 North Blvd E 3700 US Highway 17		<b>Transaction ID:</b> IE060502.0010032	
City Davenport	State FL	Zip Code 33837	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Advanced Benefits Consultants	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Stacey Stephens		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1630 W 51st St		<b>Transaction ID:</b> IE060502.0010035	
City Tulsa	State OK	Zip Code 74107-8044	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A Plus Insurance Agency	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Candy Pelz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 619 Airport No Ofc Park		<b>Transaction ID:</b> IE060502.0010036	
City Fort Wayne	State IN	Zip Code 46825-6706	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pelz Paramedical Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1045 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard C. Popkin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 3600 Wilshire Blvd Ste 1118		<b>Transaction ID:</b> IE060502.0010039	
City State Zip Code Los Angeles CA 90010-2615	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Popkin Shamir & Golan	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard R. Redfern		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 758 Thorpe Dr		<b>Transaction ID:</b> IE060502.0010040	
City State Zip Code Spring Creek NV 89815-7424	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mexivada Mining Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Cynthia L. Cirino		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 3069 Alamo Dr # 112		<b>Transaction ID:</b> IE060502.0010041	
City State Zip Code Vacaville CA 95687-6344	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sew Happy Productions	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1046 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Wendy E. Zicht		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 2207 N 30th St		<b>Transaction ID:</b> IE060502.0010045	
City Tacoma	State WA	Zip Code 98403-3320	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Law Office of Wendy E. Zicht	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Melissa Johnson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 7000 W Oakland Park Blvd Ste 202		<b>Transaction ID:</b> IE060502.0010046	
City Lauderhill	State FL	Zip Code 33313-1016	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Advanced Medical Healthcare	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Carol North		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 662 Plank Rd Ste B		<b>Transaction ID:</b> IE060502.0010049	
City Clifton Park	State NY	Zip Code 12065-2019	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer C A North Realty Corp.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1047 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Marylue T. Timpson

Mailing Address PO Box 3880

City State Zip Code  
Los Altos CA 94024-0880

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010051

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Salvador Munoz

Mailing Address 155 W Florence Ave

City State Zip Code  
Los Angeles CA 90003-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer Jalisco Building Materials Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010053

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Todd Mason

Mailing Address 2301E S Lakeshore Dr

City State Zip Code  
Decatur IL 62521-3262

FEC ID number of contributing federal political committee. **C**

Name of Employer Beach House Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010054

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1048 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Mark Fahrenholz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 2190 Shoal Creek Rd NW		<b>Transaction ID:</b> IE060502.0010058	
City Monroe	State GA	Amount of Each Receipt this Period 500.00	
Zip Code 30656-3652			
FEC ID number of contributing federal political committee. C			
Name of Employer Palmtree Express Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Russell Haberle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1946 E Cherry Ln		<b>Transaction ID:</b> IE060502.0010059	
City Souderton	State PA	Amount of Each Receipt this Period 500.00	
Zip Code 18964-1008			
FEC ID number of contributing federal political committee. C			
Name of Employer Haberle Steel Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Russell J. Greenberg		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 10 Wright St Ste 110		<b>Transaction ID:</b> IE060502.0010061	
City Westport	State CT	Amount of Each Receipt this Period 300.00	
Zip Code 06880-3115			
FEC ID number of contributing federal political committee. C			
Name of Employer Altu Capital Partner Inc.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1049 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John G. Massaro		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 879 Nassau Rd		<b>Transaction ID:</b> IE060502.0010062
City State Zip Code Uniondale NY 11553-3131	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Massaro Electric, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Robert T. Bell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 807 2nd Ave SE Ste A		<b>Transaction ID:</b> IE060502.0010064
City State Zip Code Decatur AL 35601-2543	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Robert T Bell Public Accountant	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John Mate		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 2881 E Oakland Park Blvd Ste 318		<b>Transaction ID:</b> IE060502.0010066
City State Zip Code Fort Lauderdale FL 33306-1813	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer American Investor Services	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	[ ]

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1050 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Marty Reneau, II</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address PO Box 156		<b>Transaction ID: IE060502.0010074</b>	
City State Zip Code Garrison TX 75946-0156	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer M & D Co. Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ron Marley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 3134 W 400 N		<b>Transaction ID: IE060502.0010076</b>	
City State Zip Code Marion IN 46952-9747	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Rons Sewer Septic Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Benjamin F. Rodgers, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 6264 San Felipe St		<b>Transaction ID: IE060502.0010077</b>	
City State Zip Code Houston TX 77057-2810	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1051 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Vikki K. Siegel

Mailing Address 204 Schooleys Mountain Rd

City State Zip Code  
Long Valley NJ 07853-3351

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Snow Bird Acres Farm Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 02 / 2006

Transaction ID: IE060502.0010078

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sheila A. Germain

Mailing Address 3519 S Ocean Blvd

City State Zip Code  
Highland Beach FL 33487-3301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 02 / 2006

Transaction ID: IE060502.0010080

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Billy J. Deacy

Mailing Address 290 County Line Rd

City State Zip Code  
Benton PA 17814-7766

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Trucking

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 02 / 2006

Transaction ID: IE060502.0010082

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6300.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1052 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sonia Rivelli-Jiavis

Mailing Address 6960 Edna Ave

City Las Vegas State NV Zip Code 89117-3004

FEC ID number of contributing federal political committee. **C**

Name of Employer Sonia Rivelli-Jiavis Occupation Self Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	0	6

Transaction ID: IE060502.0010083

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Joyce Frazier

Mailing Address 14330 Midway Rd Ste 225

City Dallas State TX Zip Code 75244-3530

FEC ID number of contributing federal political committee. **C**

Name of Employer Commercial Real Estate Services Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	0	6

Transaction ID: IE060502.0010086

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rose Place

Mailing Address 93 Bay St

City Glens Falls State NY Zip Code 12801-3003

FEC ID number of contributing federal political committee. **C**

Name of Employer Rose T Place, PLLC Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	0	6

Transaction ID: IE060502.0010087

Amount of Each Receipt this Period  
350.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1053 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Mary Williams		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 202 Linwood Dr		<b>Transaction ID:</b> IE060502.0010088	
City State Zip Code Paragould AR 72450-4078	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Precision's Title Services	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Estrella Krish		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 34 Palmer Ave		<b>Transaction ID:</b> IE060502.0010090	
City State Zip Code Bronxville NY 10708-3404	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Professional Health Care Associates	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Patrick T. Lee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 9025 N Atlantic Ave		<b>Transaction ID:</b> IE060502.0010091	
City State Zip Code Cape Canaveral FL 32920-3450	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Port Canaveral Steve Doring	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1054 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Janet Whitley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 19 S Broad St		<b>Transaction ID:</b> IE060502.0010092	
City State Zip Code Butler GA 31006-5519	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Partners Propane of Georgia Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Marta Katalenas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address Ste. 102 2300 Round Rock Ave.		<b>Transaction ID:</b> IE060502.0010094	
City State Zip Code Austin TX 78781-0001	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pediatric Center of Round Rock	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. James C. Nelson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 2890 Carpenter Rd Ste 600		<b>Transaction ID:</b> IE060502.0010099	
City State Zip Code Ann Arbor MI 48108-1100	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hands Across The Water Inc.	Occupation Bookkeeper		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1055 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ron Smith

Mailing Address 6346 Highway 42

City Rex State GA Zip Code 30273-1602

FEC ID number of contributing federal political committee. **C**

Name of Employer Eden Health Care Mgmt. Occupation CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: IE060502.0010101

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Martin Wall

Mailing Address 7296 US Highway 76

City Prosperity State SC Zip Code 29127-9461

FEC ID number of contributing federal political committee. **C**

Name of Employer Seal King North America Inc. Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: IE060502.0010103

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marsha Block

Mailing Address 4429 Clybourn Ave

City Toluca Lake State CA Zip Code 91602-2503

FEC ID number of contributing federal political committee. **C**

Name of Employer Greater La Financial Occupation Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: IE060502.0010104

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1300.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1056 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Chris Thiessen

Mailing Address 1127 E Main St

City Sultan State WA Zip Code 98294-9480

FEC ID number of contributing federal political committee. **C**

Name of Employer Cascade Trading Enterprises, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 02 / 2006

Transaction ID: IE060502.0010106

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Scott W. Pitser

Mailing Address 17082 Thyme Ct

City Punta Gorda State FL Zip Code 33955-4400

FEC ID number of contributing federal political committee. **C**

Name of Employer Fishing Stixs Charters Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 02 / 2006

Transaction ID: IE060502.0010108

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steven L. Rieck

Mailing Address 3449 Bay Highlands Dr

City Green Bay State WI Zip Code 54311-7319

FEC ID number of contributing federal political committee. **C**

Name of Employer Rieck Properties LLC Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 02 / 2006

Transaction ID: IE060502.0010111

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1057 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Carla Poma

Mailing Address 5424 E Grand River Ave  
Ste106

City State Zip Code  
Howell MI 48843-7169

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Michigan Medi Billing, Spc- ialists Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: IE060502.0010115

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Shawna Cox

Mailing Address 1969 S Highway 89A

City State Zip Code  
Kanab UT 84741-3954

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Color Country Homes Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: IE060502.0010117

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert C. Grantham, III

Mailing Address 1600 Bonnie Ln Ste 101-103  
Ste. 101

City State Zip Code  
Cordova TN 38016-0509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
B. G. Contractors Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2850.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

Transaction ID: IE060502.0010119

Amount of Each Receipt this Period  
350.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1058 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David W. Burgher, Sr.

Mailing Address 7431 Caruth Blvd

City State Zip Code  
Dallas TX 75225-4504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bayer Healthcare System CEO  
Found

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010120

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John W. Cassell

Mailing Address 6769 Middle Ridge Rd

City State Zip Code  
Madison OH 44057-3044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cass-mill Nurseries Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010121

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Estella B. Gulyas

Mailing Address 1700 Waterford Dr  
Apt 342

City State Zip Code  
Vero Beach FL 32966-8097

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010122

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1059 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Von L. Burton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1729 Redding Rd NW		<b>Transaction ID:</b> IE060502.0010123	
City State Zip Code Huntsville AL 35816-1109	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Athens State Univ.	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Patricia E. Barry		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 13809 Research Blvd Ste 685		<b>Transaction ID:</b> IE060502.0010125	
City State Zip Code Austin TX 78750-1349	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lucere Data	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Pedro L. Rosello		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1181 S Rogers Cir		<b>Transaction ID:</b> IE060502.0010126	
City State Zip Code Boca Raton FL 33487-2761	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rosellos Electronics Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1060 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Shirley Osinski

Mailing Address 6287 NW 24th St

City State Zip Code  
Boca Raton FL 33434-4314

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010127

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John W. Kirk

Mailing Address 1524 Old Newport Hwy

City State Zip Code  
Sevierville TN 37862-5109

FEC ID number of contributing federal political committee. **C**

Name of Employer John Wilson Kirk Cpa Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010130

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Angus E. Lovan

Mailing Address 120 Lakes At Litchfield Dr Apt 211

City State Zip Code  
Pawleys Island SC 29585-5525

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010131

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1061 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Sarah J. Werner

Mailing Address 5055 E Kentucky Ave

City State Zip Code  
Denver CO 80246-3900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sarah Werner DDS PC Dentist

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

**Transaction ID:** IE060502.0010134

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Susan S. Marks

Mailing Address 707 Voyager Ln

City State Zip Code  
West Palm Beach FL 33410-3430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Realtor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

**Transaction ID:** IE060502.0010135

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Carolyn Streight

Mailing Address 2870 Leeward Ln

City State Zip Code  
Naples FL 34103-4036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sea Streight Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

**Transaction ID:** IE060502.0010137

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3300.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1062 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Melody L. Murtaugh

Mailing Address 1055 W Eads Pkwy

City State Zip Code  
Lawrenceburg IN 47025-1162

FEC ID number of contributing federal political committee. **C**

Name of Employer Embroidme Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010139

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Carey Nitzschke

Mailing Address 7777 Morgan County Hwy

City State Zip Code  
Sunbright TN 37872-2853

FEC ID number of contributing federal political committee. **C**

Name of Employer Threadwrx LLC Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010140

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. A. J. Fajardo

Mailing Address 421 North Blvd  
906 US Hwy

City State Zip Code  
Clinton NC 28328

FEC ID number of contributing federal political committee. **C**

Name of Employer A J Fajardo MD Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010145

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1063 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Denise Bean-White</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 300 Esplanade Dr Ste 1130		<b>Transaction ID: IE060502.0010146</b>	
City Oxnard      State CA      Zip Code 93036-0235	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Consortium Media Services	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. John J. Aschberger</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 2490 W 26th Ave Ste 200A		<b>Transaction ID: IE060502.0010149</b>	
City Denver      State CO      Zip Code 80211-5318	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Western Rehabilitation Specialists	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Stephen M. Call</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1495 Rail Head Blvd Ste 12		<b>Transaction ID: IE060502.0010150</b>	
City Naples      State FL      Zip Code 34110-8461	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Distinctive Glass and Mirror LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1064 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Nancy K. Munson

Mailing Address 197 New York Ave

City State Zip Code  
Huntington NY 11743-2711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nancy K Munson Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010151

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Julie P. Niebauer

Mailing Address 6276 S Ash Cir E

City State Zip Code  
Centennial CO 80121-3132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Provident Realestate Brokers Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010153

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ezenwa L. Nwogu

Mailing Address 426 Adams St

City State Zip Code  
Dorchester MA 02122-1103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Law Offices of Ezenwa L. Nwogu Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: IE060502.0010155

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1065 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Rhonda M. Copley

Mailing Address 1527 Carter Ave

City State Zip Code  
Ashland KY 41101-7629

FEC ID number of contributing federal political committee. **C**

Name of Employer Copley Law Office      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

**Transaction ID:** IE060502.0010156

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steven L. Busch

Mailing Address 19021 Schuster Ave

City State Zip Code  
Castro Valley CA 94546-3056

FEC ID number of contributing federal political committee. **C**

Name of Employer Steven L Busch Constructi-  
on      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 6

**Transaction ID:** IE060502.0010157

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jimmy E. Bristow

Mailing Address PO Box 37

City State Zip Code  
Wake VA 23176-0037

FEC ID number of contributing federal political committee. **C**

Name of Employer J B Bristow & Son      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

**Transaction ID:** IE060503.0010002

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1066 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kevin J. Parks

Mailing Address 210 Marne St

City State Zip Code  
Rochester NY 14609-2306

FEC ID number of contributing federal political committee. **C**

Name of Employer: Greatlakes Snack & Beverage Inc.  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2006

Transaction ID: IE060503.0010003

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Tammy McCrary

Mailing Address 1346 US Highway 19 S Ste E

City State Zip Code  
Leesburg GA 31763-4854

FEC ID number of contributing federal political committee. **C**

Name of Employer: Ctsi  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2006

Transaction ID: IE060503.0010004

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jason Ripley

Mailing Address 3318 167th Ln NW

City State Zip Code  
Andover MN 55304-1968

FEC ID number of contributing federal political committee. **C**

Name of Employer: Legacy Construction Finance  
Occupation: Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2006

Transaction ID: IE060503.0010005

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1067 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Raquel Rothe</b>		Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 5</td> <td></td> <td style="text-align: center;">0 3</td> <td></td> <td style="text-align: center;">2 0 0 6</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	0 5		0 3		2 0 0 6
M M	/	D D	/	Y Y Y Y								
0 5		0 3		2 0 0 6								
Mailing Address 1957 W Main St		<b>Transaction ID:</b> IE060503.0010009 Amount of Each Receipt this Period <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; width: 80%;">500.00</td> </tr> </table>	500.00									
500.00												
City State Zip Code Salem VA 24153-3109												
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>												
Name of Employer Sleep Ez Diagnostic Center	Occupation Owner											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; width: 80%;">500.00</td> </tr> </table>	500.00										
500.00												

Full Name (Last, First, Middle Initial) <b>B. Mr. John Lewis</b>		Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 5</td> <td></td> <td style="text-align: center;">0 3</td> <td></td> <td style="text-align: center;">2 0 0 6</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	0 5		0 3		2 0 0 6
M M	/	D D	/	Y Y Y Y								
0 5		0 3		2 0 0 6								
Mailing Address PO Box 925		<b>Transaction ID:</b> IE060503.0010010 Amount of Each Receipt this Period <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; width: 80%;">250.00</td> </tr> </table>	250.00									
250.00												
City State Zip Code Hyden KY 41749-0925												
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>												
Name of Employer Infinity Energy Inc.	Occupation President											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; width: 80%;">250.00</td> </tr> </table>	250.00										
250.00												

Full Name (Last, First, Middle Initial) <b>C. Ms. Olga I. Rivera</b>		Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 5</td> <td></td> <td style="text-align: center;">0 3</td> <td></td> <td style="text-align: center;">2 0 0 6</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	0 5		0 3		2 0 0 6
M M	/	D D	/	Y Y Y Y								
0 5		0 3		2 0 0 6								
Mailing Address 5701 Bellaire Blvd Ste A		<b>Transaction ID:</b> IE060503.0010014 Amount of Each Receipt this Period <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; width: 80%;">500.00</td> </tr> </table>	500.00									
500.00												
City State Zip Code Houston TX 77081-5500												
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>												
Name of Employer One Stop Insurance	Occupation Owner											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; width: 80%;">500.00</td> </tr> </table>	500.00										
500.00												

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; width: 80%;">1250.00</td> </tr> </table>	1250.00
1250.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; height: 20px;"></td> </tr> </table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1068 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Elizabeth J. Hutson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 7700 N Kendall Dr Ste 702		<b>Transaction ID:</b> IE060503.0010017	
City Miami	State FL	Zip Code 33156-7591	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hutson and Deforres Pa	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Michele Bay		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 386 Meridian Parke Ln		<b>Transaction ID:</b> IE060503.0010018	
City Greenwood	State IN	Zip Code 46142-9425	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Your Mortgage Co. LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John A. Cisneros		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 419 Lafayette St Fl 2		<b>Transaction ID:</b> IE060503.0010019	
City New York	State NY	Zip Code 10003-7033	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cisneros Services Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1069 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Margie Havelaar</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 528 Hi Tech Pkwy		<b>Transaction ID:</b> IE060503.0010021	
City State Zip Code Oakdale CA 95361-9371	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Edelmiro Rodriguez</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1102 Harvey Rd		<b>Transaction ID:</b> IE060503.0010025	
City State Zip Code College Station TX 77840-3755	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Texas Rodco Inc.		Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Paul J. Nelson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 23 Corporate Plaza Dr		<b>Transaction ID:</b> IE060503.0010026	
City State Zip Code Newport Beach CA 92660-7911	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Paul J Nelson & Associates		Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1070 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Petra Schubert		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 6128 Sherry Ln		<b>Transaction ID:</b> IE060503.0010028	
City State Zip Code Dallas TX 75225-6301	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Petra Schubert DDS MS	Occupation Dentist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Roger C. Biede, II		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 2252 W Magee Rd		<b>Transaction ID:</b> IE060503.0010029	
City State Zip Code Tucson AZ 85742-4329	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Biede Roger C II DDS Ltd.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Phrantceena T. Halres		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 4505 Falls Of Neuse Rd		<b>Transaction ID:</b> IE060503.0010031	
City State Zip Code Raleigh NC 27609-6277	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Total Protection Services, Carolinas	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1071 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sue Bateman

Mailing Address 6526 32nd Ave S

City State Zip Code  
Grand Forks ND 58201-9146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bateman Farm Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010032

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Patricia C. Moir

Mailing Address 14523 Westlake Dr Ste 1 Suite-1

City State Zip Code  
Lake Oswego OR 97035-7700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BUILT YOUR FUTURE INC. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010033

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Duane D. Miller

Mailing Address 15 Cultural Park Pl Ste 1

City State Zip Code  
Sedona AZ 86336-9702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Miller Brothers Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010036

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1072 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Rian M. Yaffe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 409 Washington Ave Ste 700		<b>Transaction ID:</b> IE060503.0010038
City State Zip Code Towson MD 21204-4918	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Yaffe & Co. Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mary M. Phillips, Ea		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1539 Old Georgia Hwy		<b>Transaction ID:</b> IE060503.0010039
City State Zip Code Gaffney SC 29341-2169	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Tax Pro. Firm	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Mike K. Chen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1937 N Broadway St		<b>Transaction ID:</b> IE060503.0010040
City State Zip Code Carrollton TX 75006-3707	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Transair	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1073 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Cheree Love		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 5050 Robert J Mathews Pkwy		<b>Transaction ID:</b> IE060503.0010042	
City State Zip Code El Dorado Hills CA 95762-5756	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Response1 Medical Staffing	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Yisroel Ross		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 29 Kaytonne Ave		<b>Transaction ID:</b> IE060503.0010043	
City State Zip Code Waterbury CT 06710-1743	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ross Maintenance	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Kaaren Khoudikian		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 221 E Glenoaks Blvd Ste 230		<b>Transaction ID:</b> IE060503.0010045	
City State Zip Code Glendale CA 91207-2127	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer 2 Ks Architecture	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1074 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence Beer

Mailing Address 135 S Main St

City State Zip Code  
Goshen IN 46526-3701

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Primeria Financial Services  
Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010046

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lowell Parrish

Mailing Address 320 S Scott St

City State Zip Code  
Burluson TX 76028-4832

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Dp Erosion Control LLC  
Occupation  
CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010047

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Riddell, Sr.

Mailing Address 15200 Airport Rd

City State Zip Code  
Oxford GA 30054-4714

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Dixie's Jet Service  
Occupation  
CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010049

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1075 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Victor D'Airo		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 396 N 5th St		<b>Transaction ID:</b> IE060503.0010050	
City Lindenhurst	State NY	Zip Code 11757-3333	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Six D's Beverage Corp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Gabriela Cajal		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 795 Clifton Ave		<b>Transaction ID:</b> IE060503.0010052	
City Clifton	State NJ	Zip Code 07013-1815	Amount of Each Receipt this Period 700.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Champion Title Agency Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Donna Lance		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 7505 Village Square Dr		<b>Transaction ID:</b> IE060503.0010053	
City Castle Rock	State CO	Zip Code 80108-3692	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Colorado Capital Bank	Occupation Financial Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1076 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Patricia Church		Date of Receipt MM / DD / YYYY 05 / 03 / 2006
Mailing Address 54 Chelmsford St		<b>Transaction ID:</b> IE060503.0010056
City Chelmsford	State MA	Zip Code 01824-3017
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer P. Church Jewelers	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Mary Tolan		Date of Receipt MM / DD / YYYY 05 / 03 / 2006
Mailing Address 401 N Michigan Ave		<b>Transaction ID:</b> IE060503.0010058
City Chicago	State IL	Zip Code 60611-4255
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Accretive Health Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Kenneth Pacholski		Date of Receipt MM / DD / YYYY 05 / 03 / 2006
Mailing Address 2620 W Jerome St		<b>Transaction ID:</b> IE060503.0010060
City Chicago	State IL	Zip Code 60645-1408
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Whirlpool Services Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1077 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dale Singh

Mailing Address 10008 Miller Way

City State Zip Code  
South Gate CA 90280-5428

FEC ID number of contributing federal political committee. **C**

Name of Employer High Speed Steel Treating Co. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010061

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Andre Ingram

Mailing Address 1117 Desert Ln Ste 1567

City State Zip Code  
Las Vegas NV 89102-2305

FEC ID number of contributing federal political committee. **C**

Name of Employer Family Corps Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010062

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David Barroca

Mailing Address 11 Trapper Ln

City State Zip Code  
Levittown NY 11756-5230

FEC ID number of contributing federal political committee. **C**

Name of Employer David Electrical Consulting Corp. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010063

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1078 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Lisa D. Bruce

Mailing Address 8315 Whitesburg Dr S

City State Zip Code  
Huntsville AL 35802-3007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dental Professionals On Whitesburg Partner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2006

Transaction ID: IE060503.0010065

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Aneil Kumar

Mailing Address 195 S Rosemont Rd Ste 103

City State Zip Code  
Virginia Beach VA 23452-4353

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Asis President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2006

Transaction ID: IE060503.0010066

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Tejal Pathak

Mailing Address 400 S Main St Ste 2R

City State Zip Code  
Wharton NJ 07885-2043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Tejal Pathak DDS Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2006

Transaction ID: IE060503.0010067

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1079 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William R. Johns		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 115 Harding Rd		<b>Transaction ID:</b> IE060503.0010068	
City State Zip Code Niceville FL 32578-3343	Amount of Each Receipt this Period 600.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Royal Plumbing of NW. Florida, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Karen A. Marino		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 134 Barlow Ave		<b>Transaction ID:</b> IE060503.0010071	
City State Zip Code Staten Island NY 10308-1603	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Best You Can. BE	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Deborah Bachmann		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1910 Ferro Dr		<b>Transaction ID:</b> IE060503.0010074	
City State Zip Code New Lenox IL 60451-3506	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Heritage Corridor Credit Union	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1080 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Vickey Beum

Mailing Address 5229 36th Ave N

City State Zip Code  
Saint Petersburg FL 33710-2016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Good Side-Windows & Siding Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010076

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Eugenia Dickerson

Mailing Address 1055 S Charles St

City State Zip Code  
Baltimore MD 21230-4007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Federal Hill Tax Service Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010077

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jennifer Duplessis

Mailing Address 33575 Austin Grove Rd

City State Zip Code  
Bluemont VA 20135-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Kirney Group Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010079

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1081 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Karen Hickam

Mailing Address PO Box 27589

City Austin State TX Zip Code 78755-2589

FEC ID number of contributing federal political committee. **C**

Name of Employer Keller Williams Realty Inc. Occupation Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: IE060503.0010082

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Patty Brooks

Mailing Address 2448 Presidio Dr

City San Diego State CA Zip Code 92103-1018

FEC ID number of contributing federal political committee. **C**

Name of Employer Presidio Communications Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: IE060503.0010088

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joe Genero

Mailing Address 11634A Busy St

City Richmond State VA Zip Code 23236-4060

FEC ID number of contributing federal political committee. **C**

Name of Employer Fish World Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: IE060503.0010090

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1082 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Frank C. Alfonso</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address <b>407 Huntridge Dr</b>		<b>Transaction ID: IE060503.0010094</b>	
City <b>Venice</b>	State <b>FL</b>	Zip Code <b>34292-3174</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. James A. Gilbert</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address <b>284 Thornridge Dr</b>		<b>Transaction ID: IE060503.0010096</b>	
City <b>Levittown</b>	State <b>PA</b>	Zip Code <b>19054-2315</b>	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Armstrong Fence Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Edward Russell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address <b>2 Virginia Pl</b>		<b>Transaction ID: IE060503.0010098</b>	
City <b>Buffalo</b>	State <b>NY</b>	Zip Code <b>14202-1305</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Russell Edward D Architec- ts	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1083 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Burroughs

Mailing Address 166 Oneil Rd

City State Zip Code  
**Massena NY 13662-4234**

FEC ID number of contributing federal political committee. **C**

Name of Employer Progressive Imports Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
**05 / 03 / 2006**

Transaction ID: IE060503.0010102

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeremy R. Fowler

Mailing Address 511 W Missouri Ave

City State Zip Code  
**Midland TX 79701-5016**

FEC ID number of contributing federal political committee. **C**

Name of Employer Hilliard Energy Ltd. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
**05 / 03 / 2006**

Transaction ID: IE060503.0010107

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. J. D. Pickelsimer

Mailing Address PO Box 265

City State Zip Code  
**Cedar Bluff AL 35959-0265**

FEC ID number of contributing federal political committee. **C**

Name of Employer A & G Gutters Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
**05 / 03 / 2006**

Transaction ID: IE060503.0010108

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1084 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steven J. Davison

Mailing Address N6313 County Road O

City State Zip Code  
Ellsworth WI 54011-4505

FEC ID number of contributing federal political committee. **C**

Name of Employer Falls Apts. Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010109

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles J. Kochert

Mailing Address 133 Gallahad Ct

City State Zip Code  
Sevierville TN 37876-3801

FEC ID number of contributing federal political committee. **C**

Name of Employer Kochert Medical Services PLC. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010110

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Anthony J. Werderitsch

Mailing Address 6371 Saline Ann Arbor Rd

City State Zip Code  
Saline MI 48176-8806

FEC ID number of contributing federal political committee. **C**

Name of Employer Administrative Controls Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010112

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1085 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert W. Carpenter

Mailing Address PO Box 2061

City State Zip Code  
Collins MS 39428-2061

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010113

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Susan T. Mitchell

Mailing Address 5534 Maplegate Dr

City State Zip Code  
Spring TX 77373-7144

FEC ID number of contributing federal political committee. **C**

Name of Employer Kellogg Brown & Root, Inc. Occupation Accountant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010116

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James E. Acevedo

Mailing Address 24440 Mulholland Hwy

City State Zip Code  
Calabasas CA 91302-2320

FEC ID number of contributing federal political committee. **C**

Name of Employer Dcp Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010117

Amount of Each Receipt this Period  
1250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1086 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. George A. Clark, M. D.

Mailing Address 10904 Springmill Ln

City State Zip Code  
Carmel IN 46032-9565

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010119

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Lucile S. Thompson

Mailing Address 838 B Ave

City State Zip Code  
Coronado CA 92118-2616

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010120

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ralph L. Cowen

Mailing Address 517 E 3rd St

City State Zip Code  
Crowley LA 70526-5221

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farming

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1025.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2006

Transaction ID: IE060503.0010121

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1087 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James T. Henderson

Mailing Address 1570 East Ave Apt 820  
Apt 820 Valley Manor

City Rochester State NY Zip Code 14610-1642

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010125

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Deborah D. Hagen

Mailing Address 950 S Winter Park Dr Ste 350

City Casselberry State FL Zip Code 32707-5458

FEC ID number of contributing federal political committee. **C**

Name of Employer Hagen Property Consultants, Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010126

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Carol Kemery

Mailing Address 37 Wanner Rd

City Reading State PA Zip Code 19606-8508

FEC ID number of contributing federal political committee. **C**

Name of Employer Kutztown Manor Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010127

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1088 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George Bennett Smith

Mailing Address 2300 Aaron St  
Apt 313

City State Zip Code  
Port Charlotte FL 33952-5378

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

**Transaction ID:** IE060503.0010128

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James E. Hager

Mailing Address 3000 Arnold Tenbrook Rd

City State Zip Code  
Arnold MO 63010-4717

FEC ID number of contributing federal political committee. **C**

Name of Employer Arnold Defense and Elec. LLC      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

**Transaction ID:** IE060503.0010129

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Patricia A. Mitchell

Mailing Address 4305 Kathi Dr

City State Zip Code  
Bethlehem PA 18017-8740

FEC ID number of contributing federal political committee. **C**

Name of Employer La Petite Province      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

**Transaction ID:** IE060503.0010130

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7750.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1089 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John C. Canestro

Mailing Address 4747 Mira Vista Dr

City State Zip Code  
Castro Valley CA 94546-1033

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consulting Engineer

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010132

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ramiro Morales

Mailing Address 17900 NW 5th St Ste 205

City State Zip Code  
Pembroke Pines FL 33029-2809

FEC ID number of contributing federal political committee. **C**

Name of Employer Ramiro Morales Md/pa Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010133

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Laurence G. Feiler, III

Mailing Address 3737 Oak Ridge Dr

City State Zip Code  
Elkhart IN 46517-3862

FEC ID number of contributing federal political committee. **C**

Name of Employer Williamsburg Furniture Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010134

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 700.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1090 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael Barnett

Mailing Address 1719 Maxwell Rd

City State Zip Code  
Auntryville NC 28318-8750

FEC ID number of contributing federal political committee. **C**

Name of Employer: Barnett Contracting    Occupation: Owner

Receipt For:  Primary     General     Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: IE060503.0010135

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Anna T. Samarkos

Mailing Address 18 S Park Ave

City State Zip Code  
Tarpon Springs FL 34689-2556

FEC ID number of contributing federal political committee. **C**

Name of Employer: Phili Inc.    Occupation: President

Receipt For:  Primary     General     Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: IE060503.0010137

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Donna K. Tate

Mailing Address 419 Peterson St

City State Zip Code  
Oakland CA 94601-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer: Grade Ent. Design    Occupation: Owner

Receipt For:  Primary     General     Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: IE060503.0010138

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1091 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Jesse L. Johns</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address <b>618 N Jackson St</b>		<b>Transaction ID: IE060503.0010143</b>	
City <b>Clinton</b>	State <b>IL</b>	Zip Code <b>61727-1326</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>AA Billiards</b>	Occupation <b>CEO</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. William Dickey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address <b>3772 W Martin Luther King Jr Blvd Ste 106</b>		<b>Transaction ID: IE060503.0010145</b>	
City <b>Los Angeles</b>	State <b>CA</b>	Zip Code <b>90008-1766</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Behrtech Construction Corp.</b>	Occupation <b>President</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Leonardo Padron</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address <b>355 Alhambra Cir Ste 1201</b>		<b>Transaction ID: IE060503.0010146</b>	
City <b>Coral Gables</b>	State <b>FL</b>	Zip Code <b>33134-5038</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Metwest and Co.</b>	Occupation <b>CEO</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1092 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Agnes T. Smith

Mailing Address PO Box 537

City Northwood State ND Zip Code 58267-0537

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: IE060503.0010155

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John G. Dillon

Mailing Address PO Box 2208

City Gig Harbor State WA Zip Code 98335-4208

FEC ID number of contributing federal political committee. **C**

Name of Employer Bechtal Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: IE060503.0010156

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. David R. Carpenter

Mailing Address 200 E Wendover Ave

City Greensboro State NC Zip Code 27401-1228

FEC ID number of contributing federal political committee. **C**

Name of Employer David R Carpenter DDS Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 6200.00

Date of Receipt  
05 / 03 / 2006

Transaction ID: IE060503.0010157

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1093 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Lois K. Krizan

Mailing Address 2013 S Vine St

City Urbana State IL Zip Code 61801-5819

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010160

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Julio Gonzalez

Mailing Address 2510 NW 97th Ave Ste 130

City Doral State FL Zip Code 33172-1407

FEC ID number of contributing federal political committee. **C**

Name of Employer Liberty Alliance Mortgage Inc Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010162

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Teresa E. Mullins

Mailing Address 54 Mahaffey Dr

City Richmond Hill State GA Zip Code 31324-4778

FEC ID number of contributing federal political committee. **C**

Name of Employer High School Occupation Registrar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010163

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1094 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Emma Ferguson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 16601 Equestrian Ln		<b>Transaction ID: IE060503.0010164</b>	
City Chesterfield	State MO	Zip Code 63005-4881	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Saad E. El-Hage</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 5601 Powerline Rd		<b>Transaction ID: IE060503.0010167</b>	
City Fort Lauderdale	State FL	Zip Code 33309-2831	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Saad Elia El-hage Consulting	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Mary Campbell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 2000 Private Road 1640		<b>Transaction ID: IE060503.0010168</b>	
City Lueders	State TX	Zip Code 79533-2242	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1095 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Clarence G. Glenn Mailing Address 470 Shoreline Dr City State Zip Code Decatur IL 62521-5512 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> IE060503.0010169 Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Robert T. Lloyd Mailing Address 4821 Berrywood Rd Ste 131 City State Zip Code Virginia Beach VA 23464-5874 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> IE060503.0010170 Amount of Each Receipt this Period 5000.00
Name of Employer Occupation Lloyds Electric Co. CEO Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 6200.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Mary O. Willis Mailing Address 7501 E Thompson Peak Pkwy Unit 410 City State Zip Code Scottsdale AZ 85255-4537 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> IE060503.0010172 Amount of Each Receipt this Period 300.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1150.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1096 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Lenox C. Stevens

Mailing Address 4704 W Ballast Point Blvd

City Tampa State FL Zip Code 33611-5608

FEC ID number of contributing federal political committee. **C**

Name of Employer Metric Associates Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5200.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	3	/	2	0	0	6

Transaction ID: IE060503.0010173

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Garrett Cacciaguidi

Mailing Address 11245 W Almeria Rd

City Avondale State AZ Zip Code 85323-5090

FEC ID number of contributing federal political committee. **C**

Name of Employer City Of Avondale Occupation Building Inspector

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2550.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	3	/	2	0	0	6

Transaction ID: IE060503.0010174

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roger W. Parks

Mailing Address 1628 N Watson Pl

City Eagle State ID Zip Code 83616-7016

FEC ID number of contributing federal political committee. **C**

Name of Employer Jr Simplot Occupation CIO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3200.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	3	/	2	0	0	6

Transaction ID: IE060503.0010175

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1097 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Karian D. Wilhite

Mailing Address 8036 Old Dog Rd

City Lexington State OK Zip Code 73051

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Gunsmith

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010176

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Brian Veith

Mailing Address 2011 SW 70th Ave Ste A9

City Davie State FL Zip Code 33317-7332

FEC ID number of contributing federal political committee. **C**

Name of Employer Brian Veith Occupation Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010180

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Christine Boswell

Mailing Address 830 S Oates St

City Dothan State AL Zip Code 36301-2522

FEC ID number of contributing federal political committee. **C**

Name of Employer Rim Shop Inc. Occupation Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 6

Transaction ID: IE060503.0010185

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1098 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Suzanne B. Mc Claire		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1573 N Coast Hwy		<b>Transaction ID:</b> IE060503.0010187
City Laguna Beach	State CA	Zip Code 92651-1319
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer Digital Designs Ink In Laguna Beach	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Watson Coffee		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 505 Main St		<b>Transaction ID:</b> IE060503.0010189
City Blackshear	State GA	Zip Code 31516-1905
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 300.00
Name of Employer Steel & Metal Systems Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert Garduno		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 312 S Main St Ste 5		<b>Transaction ID:</b> IE060503.0010190
City Milpitas	State CA	Zip Code 95035-5326
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer Main Street Auto Body	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1099 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Demetris Dinkins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 5102 Main St		<b>Transaction ID:</b> IE060503.0010193	
City State Zip Code Columbia SC 29203-4500	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dinkins and Associates Realty LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Mitch Jones		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1041 Liberty St		<b>Transaction ID:</b> IE060503.0010199	
City State Zip Code Redding CA 96001-0712	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Engineering Mining & Construction Corp	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Randy Soto		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 310 N Rodeo Dr		<b>Transaction ID:</b> IE060503.0010200	
City State Zip Code Beverly Hills CA 90210-5106	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Harry Winston Jewelers	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1100 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Andrew J. Aken

Mailing Address 1206 Chestnut St

City State Zip Code  
Murphysboro IL 62966-2657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Globaleyes Telecommunicat- President  
ions

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010006

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kevin P. Martin

Mailing Address 2160 E Fry Blvd PMB 308

City State Zip Code  
Sierra Vista AZ 85635-2736

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Get A Grip of Southern AZ Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010009

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Lucy R. Babaran

Mailing Address 17623 Burbank Blvd

City State Zip Code  
Encino CA 91316-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Prn. Inc. CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010010

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1101 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gail Silva		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 20 S Rose Ave Ste 8		<b>Transaction ID:</b> IE060504.0010012	
City State Zip Code Kissimmee FL 34741-5401	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gail Linscott Silva Pa	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mollie L. Trammell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 37 Calumet Pkwy Ste J201		<b>Transaction ID:</b> IE060504.0010013	
City State Zip Code Newnan GA 30263-6738	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer S & T Assessment & Counseling Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3100.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Charlise A. Parks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1106 E Bankhead St		<b>Transaction ID:</b> IE060504.0010014	
City State Zip Code New Albany MS 38652-5303	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1102 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James A. Trimble

Mailing Address 313 Hodges Cove Rd

City State Zip Code  
Grafton VA 23692-3148

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5100.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010015

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jerry Spangler

Mailing Address 419 W Benson St

City State Zip Code  
Cincinnati OH 45215-3103

FEC ID number of contributing federal political committee. **C**

Name of Employer Spangler's Cafe Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010017

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Luis Bautista

Mailing Address 21 North St

City State Zip Code  
Danbury CT 06810-5604

FEC ID number of contributing federal political committee. **C**

Name of Employer El-Nuevo Milenio Restaurant Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010018

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1103 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Mary A. Jordan

Mailing Address 3068 Chapel Hill Rd

City Douglasville State GA Zip Code 30135-1761

FEC ID number of contributing federal political committee. **C**

Name of Employer Realty Executives Premier Occupation Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 04 / 2006

Transaction ID: IE060504.0010020

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Shirley M. Williams

Mailing Address 35 S 29th St

City Camden State NJ Zip Code 08105-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer Group Homes of Camden Co. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 04 / 2006

Transaction ID: IE060504.0010022

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Vipan K. Kalhan

Mailing Address 8205 Bay Tree Ln

City Jacksonville State FL Zip Code 32256-3609

FEC ID number of contributing federal political committee. **C**

Name of Employer Shakti Enterprises Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 04 / 2006

Transaction ID: IE060504.0010023

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1104 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas J. Hoehner

Mailing Address 34027 N 99th PI

City State Zip Code  
Scottsdale AZ 85262-1467

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Titan Health Mgmt. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: IE060504.0010025

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Shirley C. Olsson

Mailing Address PO Box 300

City State Zip Code  
West Point VA 23181-0300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: IE060504.0010029

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. T. Burkett

Mailing Address PO Box 520

City State Zip Code  
Kilgore TX 75663-0520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Petro. Tool Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2006

Transaction ID: IE060504.0010033

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1105 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Barbara Bridendolph		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 475 Park Ave S Fl 21		Transaction ID: IE060504.0010034
City New York	State NY	Zip Code 10016-6901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Crenshaw Associates	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ngure Gibson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5602 Baltimore National Pike Ste 603		Transaction ID: IE060504.0010035
City Baltimore	State MD	Zip Code 21228-1409
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Touching Angel	Occupation INFO REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mark McDaniel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 17 Concord Cades Rd R		Transaction ID: IE060504.0010038
City Milan	State TN	Zip Code 38358-5353
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Mag. Construction	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1106 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Lisa Villanueva		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 11048 Warwick Blvd		<b>Transaction ID:</b> IE060504.0010043	
City State Zip Code Newport News VA 23601-3229	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Villanueva Agency, Ltd.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Sgt. Milton K. Andrade		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1310 Heulu St		<b>Transaction ID:</b> IE060504.0010044	
City State Zip Code Honolulu HI 96822-3022	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hawaii Police Department	Occupation Police Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Hilda J. Pianta		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 150 Ocean Dr Apt 2B Apt 2B		<b>Transaction ID:</b> IE060504.0010045	
City State Zip Code Baton Rouge LA 70806-4653	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1107 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Eldon O. Weyh		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address W9435 Hwy X		<b>Transaction ID:</b> IE060504.0010049	
City State Zip Code Portage WI 53901-9474	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Russ Kitchen		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 8336 Nieman Rd		<b>Transaction ID:</b> IE060504.0010051	
City State Zip Code Shawnee Mission KS 66214-1510	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer C M G Construction Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Nicholas E. Mundt		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 1713 Commercial Ave		<b>Transaction ID:</b> IE060504.0010052	
City State Zip Code Madison WI 53704-4617	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Investors Mortgage LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1108 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Tamara Bennett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1063 Texan Trl Ste 100		<b>Transaction ID: IE060504.0010054</b>
City State Zip Code Grapevine TX 76051-3742	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Imap Global Logistics Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. Katherine S. Quinn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 240 9th St		<b>Transaction ID: IE060504.0010056</b>
City State Zip Code Del Mar CA 92014-2717	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Katherine S Quinn Ph.D.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. David L. Howard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 82 Ashton Ct		<b>Transaction ID: IE060504.0010059</b>
City State Zip Code Vallejo CA 94591-6804	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1109 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Dixon

Mailing Address 422 Long Ave

City State Zip Code  
Roxboro NC 27573-5102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Morning Sun Golf LLC Treasurer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010060

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Polly Grimaldi

Mailing Address 416 New London Rd

City State Zip Code  
Newark DE 19711-7010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rite Way By Polly Nurse

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010062

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lloyd P. Shepherd

Mailing Address 58484 Buffalo Mine Rd

City State Zip Code  
Senecaville OH 43780-9711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010065

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1111 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David M. Nash		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 30809 Elmhurst Dr		<b>Transaction ID:</b> IE060504.0010070	
City State Zip Code Madison Hts MI 48071-2291	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Nash & Assoc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Helmut Schroeder		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 3731 Northcrest Rd Ste 6		<b>Transaction ID:</b> IE060504.0010073	
City State Zip Code Atlanta GA 30340-3415	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Railquip Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Diana F. Perparos		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 4730 Myrtle Ave Ste A		<b>Transaction ID:</b> IE060504.0010074	
City State Zip Code Sacramento CA 95841-3645	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer ADP Financial , Inc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1112 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Robert E. Stevens</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 801 N Fm Road 1187		<b>Transaction ID:</b> IE060504.0010076	
City State Zip Code Aledo TX 76008-4373	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Louise Ettlich</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 14705 Williamsburg St		<b>Transaction ID:</b> IE060504.0010079	
City State Zip Code Riverview MI 48193-7605	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 561.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Helen L. Peterson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 509 Missouri St		<b>Transaction ID:</b> IE060504.0010080	
City State Zip Code San Francisco CA 94107-2836	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1113 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Theresa Chambers

Mailing Address 2604 Wolflin Ave

City State Zip Code  
Amarillo TX 79109-1826

FEC ID number of contributing federal political committee. **C**

Name of Employer Chambers Electric      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

**Transaction ID:** IE060504.0010084

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Athena Z. Yerganian

Mailing Address 89 Bellevue Hill Rd

City State Zip Code  
Boston MA 02132-6423

FEC ID number of contributing federal political committee. **C**

Name of Employer Innovative Mgmt. Consulting, Inc.      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

**Transaction ID:** IE060504.0010085

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Mary Keller

Mailing Address 1839 Belgrade Ave

City State Zip Code  
Charleston SC 29407-5713

FEC ID number of contributing federal political committee. **C**

Name of Employer Charleston Pet Resort      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

**Transaction ID:** IE060504.0010087

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1114 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Stephen M. Strunk</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1410 S Acacia Ave Ste D		<b>Transaction ID: IE060504.0010089</b>	
City Fullerton	State CA	Zip Code 92831-5309	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Accu-Care Cremation Center	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Hulda W. Betts</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 4046 Jackdaw St		<b>Transaction ID: IE060504.0010091</b>	
City San Diego	State CA	Zip Code 92103-1721	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Walter J. Streicher</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 2617 Somerset Dr		<b>Transaction ID: IE060504.0010092</b>	
City Belmont	State CA	Zip Code 94002-2927	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1115 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Vivian Magnan		Date of Receipt MM / DD / YYYY 05 / 04 / 2006	
Mailing Address PO Box 8520		<b>Transaction ID:</b> IE060504.0010093	
City Medford	State OR	Zip Code 97504-0520	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C			
Name of Employer Vivian Magnan Realty	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth M. Costa		Date of Receipt MM / DD / YYYY 05 / 04 / 2006	
Mailing Address 8410 E Twisted Leaf Dr		<b>Transaction ID:</b> IE060504.0010094	
City Gold Canyon	State AZ	Zip Code 85218-1971	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer World Wise Business Solutions Llc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Darren M. Watson		Date of Receipt MM / DD / YYYY 05 / 04 / 2006	
Mailing Address 4607 Wood Ave		<b>Transaction ID:</b> IE060504.0010095	
City Jacksonville	State FL	Zip Code 32207-2812	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer D M Watson Construction Incorporate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1116 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Craig W. Brannan, Sr.

Mailing Address 3518 Island Dr

City State Zip Code  
N Topsail Beach NC 28460-8202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
C N & D Pizza Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010096

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Tony Araiza

Mailing Address 1220 3rd Ave Ste B

City State Zip Code  
Chula Vista CA 91911-3276

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mad Investments Group Chairman

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010097

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James Paul

Mailing Address 1755 Old Dean Forest Rd

City State Zip Code  
Pooler GA 31322-9502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Terra Crete Designs Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010098

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1117 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Daniel Scherlek		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 6885 Speedway Blvd Unit 1 Suite Y103		Transaction ID: IE060504.0010100
City Las Vegas State NV Zip Code 89115-1733	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Mountainview Air Occupation Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard Carmack		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4513 Hixson Pike		Transaction ID: IE060504.0010101
City Hixson State TN Zip Code 37343-5039	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RMJ Tactical LLC Occupation CEO	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Lydon J. Flume		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 708 W Summit Ave		Transaction ID: IE060504.0010102
City San Antonio State TX Zip Code 78212-2746	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ed Flume Building Specialties Ltd. Occupation President	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1118 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Susan M. Santry		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 39 Glen Ridge Rd		<b>Transaction ID:</b> IE060504.0010103	
City Greenwich	State CT	Zip Code 06831-3621	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Susan M Santry MD & Valnio M Buttar	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Gregg G. Hipple		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 7729 79th St S		<b>Transaction ID:</b> IE060504.0010104	
City Cottage Grove	State MN	Zip Code 55016-1832	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Gregg G Hipple DDS MS Ltd.	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Eгна Cuza		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 650931		<b>Transaction ID:</b> IE060504.0010107	
City Miami	State FL	Zip Code 33265-0931	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Erc Appraisers & Associates Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1119 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Stephan M. Lemmond</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 300 N Coit Rd		<b>Transaction ID:</b> IE060504.0010111	
City Richardson	State TX	Zip Code 75080-5400	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lemmond Financial Group	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Javad Zolfaghari</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 3417 Stacey Ct		<b>Transaction ID:</b> IE060504.0010113	
City Mountain View	State CA	Zip Code 94040-4558	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Zolman Construction, Inc.	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas W. Flatt</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 269 E Crescent Ave		<b>Transaction ID:</b> IE060504.0010114	
City Mahwah	State NJ	Zip Code 07430-1569	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C			
Name of Employer Tom Flatt Golf Shop	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1120 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Trudy McIvaine Mailing Address 115 S 3rd St City State Zip Code Clearfield PA 16830-2303 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> IE060504.0010117 Amount of Each Receipt this Period 300.00
Name of Employer Trudy McIvaine Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Don Frank Mailing Address PO Box 9 City State Zip Code Covina CA 91723-0009 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> IE060504.0010118 Amount of Each Receipt this Period 250.00
Name of Employer Willow Elem. School Occupation Principal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sheryl Dennis Mailing Address 20 William St Ste 165 City State Zip Code Wellesley MA 02481-4105 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> IE060504.0010121 Amount of Each Receipt this Period 500.00
Name of Employer Fields and Dennis LLP Occupation Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1121 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Jane Styer-Acevedo

Mailing Address 408 Broadview Rd

City State Zip Code  
Upper Darby PA 19082-3717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N D T Aquatic Therapy Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010123

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Karen Turner

Mailing Address 3123 Lemon Grove Ave

City State Zip Code  
Lemon Grove CA 91945-2536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Colon Works President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010124

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Dennis G. Overdorf

Mailing Address 2626 SE 18th Ct  
Apt 7

City State Zip Code  
Des Moines IA 50320-1201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Old Dominion Freightlines Truck Driver

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

Transaction ID: IE060504.0010127

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5800.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1122 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold L. Fratz

Mailing Address 2831 SE 16th PI

City State Zip Code  
Cape Coral FL 33904-4002

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
05 / 04 / 2006

Transaction ID: IE060504.0010128

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. June K. Kane

Mailing Address 9 Greentree Ter

City State Zip Code  
Tenafly NJ 07670-2405

FEC ID number of contributing federal political committee. **C**

Name of Employer Intl. Museum of Childrens Arts Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 04 / 2006

Transaction ID: IE060504.0010134

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Sandra Boucher Frazier

Mailing Address 216 Oakland Ave Ste 2

City State Zip Code  
Tallahassee FL 32301-4472

FEC ID number of contributing federal political committee. **C**

Name of Employer Spirit Realty Inc. of Tallahassee Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 04 / 2006

Transaction ID: IE060504.0010138

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1123 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. H. Guy Hardy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 12700 Lake Ave Apt 613		<b>Transaction ID:</b> IE060504.0010139	
City Lakewood	State OH	Zip Code 44107-1547	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5001.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Don Garland		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 916		<b>Transaction ID:</b> IE060504.0010140	
City Lewisville	State TX	Zip Code 75067-0916	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lewisville Insurance Agency	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Margaret S. Stewart		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1670 Carmel Cir E		<b>Transaction ID:</b> IE060504.0010142	
City Upland	State CA	Zip Code 91784-1705	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1124 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Amy Boehner</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address <b>405 Alberto Way Ste 1A</b>		<b>Transaction ID: IE060504.0010145</b>	
City <b>Los Gatos</b>	State <b>CA</b>	Zip Code <b>95032-5406</b>	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Amy Lee Boehner State Farm Insurance	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Teresa D. Connatser</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address <b>1629 Meadowglen Ln</b>		<b>Transaction ID: IE060504.0010146</b>	
City <b>Mesquite</b>	State <b>TX</b>	Zip Code <b>75150-1301</b>	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Nolan Environmental	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Serge A. Walters</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address <b>1536 1/2 18th St</b>		<b>Transaction ID: IE060504.0010147</b>	
City <b>Santa Monica</b>	State <b>CA</b>	Zip Code <b>90404-3404</b>	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None	Occupation Computer Programmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1125 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Alanna Zrimsek		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 414 Mason St Ste 704		<b>Transaction ID:</b> IE060504.0010148	
City San Francisco	State CA	Amount of Each Receipt this Period 300.00	
Zip Code 94102-1720			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Alanna Zrimsek Consultant	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Thomas A. Hennelly		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 2758 E Millennium Pl Ste 1		<b>Transaction ID:</b> IE060504.0010149	
City Fayetteville	State AR	Amount of Each Receipt this Period 300.00	
Zip Code 72703-4711			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer H2 Engineering Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Royal Snyder		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 2301 Falcon Dr		<b>Transaction ID:</b> IE060504.0010153	
City Ontario	State OR	Amount of Each Receipt this Period 300.00	
Zip Code 97914-1145			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Royal's Truck & Diesel Repair	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1126 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Willie B. Nelson

Mailing Address 214 W Broadway

City State Zip Code  
Seminole OK 74868-3312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
A M Fitness Center Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 04 / 2006

Transaction ID: IE060504.0010155

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sona Saroyan

Mailing Address 7479 N Laguna Vista Ave

City State Zip Code  
Fresno CA 93711-0231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Saroyan Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 04 / 2006

Transaction ID: IE060504.0010157

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Oscar Besler

Mailing Address 3764 County Road 126

City State Zip Code  
Van Vleck TX 77482-6132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Besler Sand Blasting & Painting Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 04 / 2006

Transaction ID: IE060504.0010158

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1127 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George Myles

Mailing Address 2521 NW 16th Ln

City Pompano Beach State FL Zip Code 33064-1547

FEC ID number of contributing federal political committee. **C**

Name of Employer Miles Aviation Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2001.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 6

**Transaction ID:** IE060504.0010163

Amount of Each Receipt this Period  
 1250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard F. Szturm

Mailing Address 10400 Reading Rd

City Cincinnati State OH Zip Code 45241-4816

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 6

**Transaction ID:** IE060504.0010164

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Bill Alexander

Mailing Address 835 Boon Rd

City Somers State MT Zip Code 59932-9736

FEC ID number of contributing federal political committee. **C**

Name of Employer Great Plains Wind & Energy LLC Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 6

**Transaction ID:** IE060504.0010166

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2050.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1128 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Evelyn G. Zneimer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1930 Wilshire Blvd Ste 910		<b>Transaction ID: IE060504.0010168</b>	
City State Zip Code Los Angeles CA 90057-3619	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Evelyn G. Zneimer Law Offices	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Lynda Conlee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 3106 Indian Mound Rd		<b>Transaction ID: IE060504.0010169</b>	
City State Zip Code Georgetown TX 78628-1200	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hill Country Care Home	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ron Linn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 2002 N Stockton Hill Rd		<b>Transaction ID: IE060504.0010170</b>	
City State Zip Code Kingman AZ 86401-4698	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Linn Construction Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1129 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Guillermo F. Schmatz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 2797 Timberline Ct		<b>Transaction ID:</b> IE060504.0010171	
City State Zip Code Oakton VA 22124-1129	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lema Investments Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Richard H. Fisher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1921 McVitty Rd		<b>Transaction ID:</b> IE060504.0010175	
City State Zip Code Salem VA 24153-7405	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Walt T. Bowman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 931 Spring Creek Rd Ste 204		<b>Transaction ID:</b> IE060504.0010176	
City State Zip Code East Ridge TN 37412-3977	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Allied Home Mortgage Capital Corp.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1130 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Helen Octavia Rand

Mailing Address 908 Crescent Dr

City State Zip Code  
Saint Louis MO 63105-2506

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt  
05 / 04 / 2006

Transaction ID: IE060504.0010179

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Doug C. Combs

Mailing Address PO Box 942

City State Zip Code  
Jeffersonville IN 47131-0942

FEC ID number of contributing federal political committee. **C**

Name of Employer R B Carriers, Inc. Occupation Ceo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
05 / 04 / 2006

Transaction ID: IE060504.0010180

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Miriam Janicki-Crespo

Mailing Address 8315 Northern Blvd  
2nd Floor Front

City State Zip Code  
Jackson Heights NY 11372-1459

FEC ID number of contributing federal political committee. **C**

Name of Employer Miriam Janicki Crespo Att-  
y. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 04 / 2006

Transaction ID: IE060504.0010182

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1131 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Beverly F. McClenathan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 570 Halls Creek Rd		<b>Transaction ID:</b> IE060504.0010186	
City Olaton	State KY	Zip Code 42361-9718	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Mike Dehart		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 195 Park Plaza Dr		<b>Transaction ID:</b> IE060505.0010002	
City Winston Salem	State NC	Zip Code 27105-2650	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Salem Health Services	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Rogelio Lara, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 11020 N Kendall Dr Ste 200		<b>Transaction ID:</b> IE060505.0010004	
City Miami	State FL	Zip Code 33176-1202	Amount of Each Receipt this Period 700.00
FEC ID number of contributing federal political committee. C			
Name of Employer Children's Experience	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1132 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Pauline Hill

Mailing Address 6499 38th Ave N Ste F2  
Ste F2

City State Zip Code  
Saint Petersburg FL 33710-1650

FEC ID number of contributing federal political committee. **C**

Name of Employer Professional Duplicating Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: IE060505.0010006

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Rosa E. Pazos-Cingari

Mailing Address 130 W Park St

City State Zip Code  
Lakeland FL 33803-1224

FEC ID number of contributing federal political committee. **C**

Name of Employer Repc Accounting & Translations Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: IE060505.0010008

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Nancy L. Ziemba

Mailing Address 13984 Kingswood St

City State Zip Code  
Wyandotte MI 48193-7856

FEC ID number of contributing federal political committee. **C**

Name of Employer Kingswood Enterprises Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: IE060505.0010009

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1133 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Creston D. Gallup		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 12135 Annette Ln		Transaction ID: IE060505.0010011	
City State Zip Code Fishers IN 46037-8196	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Crossroads Wireless LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John S. Blanco		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 5814 Spring Dove St		Transaction ID: IE060505.0010013	
City State Zip Code San Antonio TX 78247-1612	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Covenant Construction and Security	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Gussie Manos		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address PO Box 5613		Transaction ID: IE060505.0010016	
City State Zip Code Santa Maria CA 93456-5613	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A Spiritual Abode Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1134 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Giselle Farinas

Mailing Address PO Box 833325

City State Zip Code  
Miami FL 33283-3325

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Global Property Management, Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010017

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Naveen Jain

Mailing Address 500 108th Ave NE  
Ste 1660

City State Zip Code  
Bellevue WA 98004-5500

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Intelius

Occupation  
CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010018

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Cindra A. Stolk

Mailing Address 1735 Spruce St  
Ste A

City State Zip Code  
Riverside CA 92507-2352

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Federal Edge Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010020

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1135 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Mary E. Dvoratchek</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address PO Box 718		<b>Transaction ID: IE060505.0010023</b>	
City Keshena	State WI	Zip Code 54135-0718	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hard Rock Sawing & Drilling	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Rex Fortune, III</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 1430 Willow Pass Rd Ste 160		<b>Transaction ID: IE060505.0010024</b>	
City Concord	State CA	Zip Code 94520-5287	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Project Pipeline Teacher Credentials	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ben Gaspard</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 885 Albany Ave		<b>Transaction ID: IE060505.0010027</b>	
City Brooklyn	State NY	Zip Code 11203-3003	Amount of Each Receipt this Period 700.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mc Fay Contracting Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1136 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Gina R. Perez-Calhoun

Mailing Address 120 Broadway Ste 303

City State Zip Code  
Kissimmee FL 34741-5706

FEC ID number of contributing federal political committee. **C**

Name of Employer Law Offices of Gina R. Perez-Calhoun  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010028

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Rosa Barraza

Mailing Address 2103 1st St

City State Zip Code  
Alamogordo NM 88310-3301

FEC ID number of contributing federal political committee. **C**

Name of Employer Children's World Child Development Cen  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010029

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Carolyn S. Deaner

Mailing Address 831 Crawford Ave

City State Zip Code  
Augusta GA 30904-3772

FEC ID number of contributing federal political committee. **C**

Name of Employer Deaner Diversified Techn. Inc.  
Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010030

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1137 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Ron Ziemann

Mailing Address 4101 Morris St NE Ste D

City State Zip Code  
Albuquerque NM 87111-3605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ronald W Ziemann DDS Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010031

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Marie G. Vital

Mailing Address 1065 NE 125th St Ste 317

City State Zip Code  
North Miami FL 33161-5833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Maria Vital Law Office Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010033

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Marc S. Curtis

Mailing Address 105 California Ave

City State Zip Code  
Leland MS 38756-3104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Marc Curtis Farms Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010034

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1100.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1138 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael Terry

Mailing Address 627 Fishermans Bnd

City State Zip Code  
Mount Pleasant SC 29464-8140

FEC ID number of contributing federal political committee. **C**

Name of Employer Agent Owned Realty Occupation  
Real Estate Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010037

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Matt Penland

Mailing Address 227 W Young High Pike

City State Zip Code  
Knoxville TN 37920-3051

FEC ID number of contributing federal political committee. **C**

Name of Employer Matt Penland State Farm Occupation  
Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010038

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ingrid Tugwell

Mailing Address 530 International Blvd Building B

City State Zip Code  
North Charleston SC 29418-6937

FEC ID number of contributing federal political committee. **C**

Name of Employer Pst. Computer Training In-c. Occupation  
CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5500.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010039

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1139 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Carolyn Kuehn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 6655 W Sahara Ave Ste B200		<b>Transaction ID:</b> IE060505.0010040	
City Las Vegas	State NV	Amount of Each Receipt this Period 250.00	
Zip Code 89146-2832		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Marbeya Executive Suites	Occupation Manager	Receipt For:	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Steven Gurgold</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 6239 Lake Osprey Dr		<b>Transaction ID:</b> IE060505.0010041	
City Sarasota	State FL	Amount of Each Receipt this Period 250.00	
Zip Code 34240-8433		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Carmine Goldberg's Real NY Deli	Occupation Owner	Receipt For:	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Ephraim Klein</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address PO Box 53		<b>Transaction ID:</b> IE060505.0010042	
City Cedarhurst	State NY	Amount of Each Receipt this Period 250.00	
Zip Code 11516-0053		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Coffeebreak Time Inc.	Occupation President	Receipt For:	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1140 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Frank T. Smith, III

Mailing Address PO Box 196  
785 N Bear Lake Blvd

City Garden City State UT Zip Code 84028-0196

FEC ID number of contributing federal political committee. **C**

Name of Employer Mountain Lake Properties West Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010043

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Anita Miller

Mailing Address 2431 250th St

City Independence State IA Zip Code 50644-9357

FEC ID number of contributing federal political committee. **C**

Name of Employer Pine Creek Elecenteronic Service Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010044

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert Angolano

Mailing Address 4547 E Speedway Blvd

City Tucson State AZ Zip Code 85712-5301

FEC ID number of contributing federal political committee. **C**

Name of Employer Thermal Block Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010046

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1141 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Bang Pham</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 12923 Inglewood Ave Ste 1		<b>Transaction ID:</b> IE060505.0010049	
City State Zip Code Hawthorne CA 90250-5139	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer St. Paul Medical Center	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Marie Young</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 119 N Robinson Ave Ste 140		<b>Transaction ID:</b> IE060505.0010058	
City State Zip Code Oklahoma City OK 73102-4613	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Oklahoma City Florist	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Aaron L. Rumfallo</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 3359 S Joshua Tree Ln		<b>Transaction ID:</b> IE060505.0010061	
City State Zip Code Gilbert AZ 85297-7855	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Advance Window Films LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1142 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Stephen Ly Crawford, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 4212 Hoffman Dr		<b>Transaction ID:</b> IE060505.0010062	
City State Zip Code Austin TX 78749-3690	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Crawford Equity Group LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Theresa A. Sanders</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 3012 Main St		<b>Transaction ID:</b> IE060505.0010063	
City State Zip Code Buffalo NY 14214-1057	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer My Kids Child Care Developmental Center	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Betty Williams</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 4194 Jung Rd		<b>Transaction ID:</b> IE060505.0010064	
City State Zip Code San Antonio TX 78247-2711	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Baw Country Day School Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1143 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Laine Wakimoto Pike</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 2101 Rosecrans Ave # 3205		<b>Transaction ID:</b> IE060505.0010065	
City State Zip Code El Segundo CA 90245-4749	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Oceanview Financial Group	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Emily Harnoncourt</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 2021 Santa Monica Blvd		<b>Transaction ID:</b> IE060505.0010066	
City State Zip Code Santa Monica CA 90404-2208	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Emily Iker MD	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Loni J. Broten</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 2525 Simpson Ave		<b>Transaction ID:</b> IE060505.0010070	
City State Zip Code Hoquiam WA 98550-3932	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer All State Insurance Co.	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1144 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Mailou Humphries</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 3940 W 96th St Ste A		<b>Transaction ID: IE060505.0010073</b>	
City State Zip Code Indianapolis IN 46268-2923	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer La Beaute Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Gina K. Carriker</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 9929 Albemarle Rd Ste 4A		<b>Transaction ID: IE060505.0010074</b>	
City State Zip Code Charlotte NC 28227-3363	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Developmental Disability Resource	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Curtis E. Roberts</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 575 County Road 85		<b>Transaction ID: IE060505.0010077</b>	
City State Zip Code Stevenson AL 35772-5528	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Curt's Trucking LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1145 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Gregory T. Jackson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 7260 Virginia Ct		<b>Transaction ID: IE060505.0010081</b>	
City State Zip Code Frankfort IL 60423-3011	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sagg Property Managment	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Maria Gill</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 901 S Military Trl Ste A-8		<b>Transaction ID: IE060505.0010088</b>	
City State Zip Code West Palm Beach FL 33415-3909	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Proven Realty LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Marlene A. Gadinis</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 12925 El Camino Real Ste J5 & J6		<b>Transaction ID: IE060505.0010090</b>	
City State Zip Code San Diego CA 92130	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ecotique Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1146 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gary Buda

Mailing Address 80 Phillips Rd

City State Zip Code  
Brighton TN 38011-3644

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fun On A Bun-Budas Hot Dogs & Sausage Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010091

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James Agnello

Mailing Address 342 Greentree Rd

City State Zip Code  
Sewell NJ 08080-1866

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jonathan's Computer Center President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010093

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
Marty Ostronic

Mailing Address 10310 N Olive Ave

City State Zip Code  
Kansas City MO 64155-3145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Staley Farms Golf Club Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010094

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1147 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Christopher P. Katter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 38397 Innovation Ct Ste 106		<b>Transaction ID:</b> IE060505.0010095
City State Zip Code Murrieta CA 92563-2631	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Geotech LLC	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Landon C. McNeill		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 4712 Cricklewood Dr		<b>Transaction ID:</b> IE060505.0010096
City State Zip Code Greensboro NC 27407-4017	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ace Electric Inc. Valdosta Group	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Gunter Unruh		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 217 E Hacienda Ave		<b>Transaction ID:</b> IE060505.0010097
City State Zip Code Campbell CA 95008-6616	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Metric Design & Manufacturing	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	925.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1148 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Saul Cortez</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 800 Oneida St Ste A3		<b>Transaction ID: IE060505.0010099</b>	
City State Zip Code Storm Lake IA 50588-3209	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cspplus Income. Tax Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ronald J. Carroll</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 195 Adams St Apt 2J		<b>Transaction ID: IE060505.0010100</b>	
City State Zip Code Brooklyn NY 11201-1848	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Guided Technology Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Carolyn P. Haman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address PO Box 176		<b>Transaction ID: IE060505.0010101</b>	
City State Zip Code New Carlisle OH 45344-0176	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 351.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1149 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Edward E. Babcock, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 307 E Oak St		Transaction ID: IE060505.0010104	
City State Zip Code Coudersport PA 16915-1536	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Telcove	Occupation Chief Financial Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Bill J. Eckert		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address PO Box 377		Transaction ID: IE060505.0010106	
City State Zip Code Renville MN 56284-0377	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wren House Motel	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Clifford H. Davis, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 244 County Road 165		Transaction ID: IE060505.0010107	
City State Zip Code Autaugaville AL 36003-2600	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Autuga Water Bottling Co., Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1150 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Reta G. Ballard		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 155 Lake St		<b>Transaction ID:</b> IE060505.0010108	
City Middleton	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 01949-2024			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 402.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Miss Jane B. Folkrod		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 1050 E Pine St Apt 301		<b>Transaction ID:</b> IE060505.0010109	
City Silver City	State NM	Amount of Each Receipt this Period 5000.00	
Zip Code 88061-7174			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5150.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Peggy Maguire		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 7329 Clancy Way Ste 300 Ste 200		<b>Transaction ID:</b> IE060505.0010110	
City Westerville	State OH	Amount of Each Receipt this Period 2500.00	
Zip Code 43082-9499			
FEC ID number of contributing federal political committee. C			
Name of Employer Law Offices of Peggy Maguire	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1151 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Cara Potter

Mailing Address 615 S Chestnut St

City State Zip Code  
Friend NE 68359-1631

FEC ID number of contributing federal political committee. **C**

Name of Employer National Association of Chain Drug Sto  
Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010111

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Phyllis I. Hill

Mailing Address 105 Wactor St

City State Zip Code  
Sumter SC 29150-4544

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired  
Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1126.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010112

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark W. Abbott

Mailing Address 800 Phillips Rd

City State Zip Code  
Webster NY 14580-9720

FEC ID number of contributing federal political committee. **C**

Name of Employer Xerox  
Occupation Trucker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010113

Amount of Each Receipt this Period  
1250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1152 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David E. Stowers

Mailing Address PO Box 1729

City State Zip Code  
Pilot Mountain NC 27041-1729

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Stowers Enterprises Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: IE060505.0010114

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. George Ordynsky

Mailing Address 7903 E Desert Cove Ave

City State Zip Code  
Scottsdale AZ 85260-5557

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Physician

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: IE060505.0010115

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. James Henderson

Mailing Address 20450 Huebner Rd # 8

City State Zip Code  
San Antonio TX 78258-3942

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: IE060505.0010116

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1153 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Christina B. Larson

Mailing Address 346 La Salle Rd

City State Zip Code  
Goleta CA 93117-2975

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 6555.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010117

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Kathryn T. Heberling

Mailing Address 4355 Georgetown Sq Apt 227  
Apt. 227

City State Zip Code  
Atlanta GA 30338-6245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010118

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Fredrick L. Johnston

Mailing Address 1518 Honey Suckle Ct

City State Zip Code  
Pleasanton CA 94588-8219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Olympic Orthodontics Orthodontist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010120

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1154 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Caryn Northan

Mailing Address 1490 S US Highway 17 92

City State Zip Code  
Longwood FL 32750-6543

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Northan Leathers Furniture Showplace

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010122

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Phuong Nguyen

Mailing Address 1310 Airport Rd Ste B

City State Zip Code  
Monroe NC 28110-7390

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Qems Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010123

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Patricia Garofolo

Mailing Address 425 E Linfield Rd

City State Zip Code  
Roversford PA 19468-2816

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Pebble Pools Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010125

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1155 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Gloria Gentile</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 7116-22 Elmwood Ave #20		<b>Transaction ID: IE060505.0010126</b>	
City Philadelphia	State PA	Zip Code 19142	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Penn. City Auto Stores Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Joseph A. Rexrode</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 8200 Greensboro Dr 900		<b>Transaction ID: IE060505.0010127</b>	
City Mc Lean	State VA	Zip Code 22102-3892	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Envision Technical Services	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Jay Javaid</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 60 Broadway Ave		<b>Transaction ID: IE060505.0010128</b>	
City Bedford	State OH	Zip Code 44146-2002	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Broadway Animal Clinic	Occupation Veterinarian		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1156 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jay H. Hilsher, Jr. Mailing Address 1626 Riverside Dr City State Zip Code Williamsport PA 17702-7041 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> IE060505.0010133 Amount of Each Receipt this Period 300.00
Name of Employer Occupation Hilsher Graphics Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Tabitha Averette Mailing Address 9081 Al Highway 22 City State Zip Code Maplesville AL 36750-3221 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> IE060505.0010137 Amount of Each Receipt this Period 300.00
Name of Employer Occupation TJ Discount Drugs Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Shelly Norman Mailing Address 3430 E Flamingo Rd Ste 300 City State Zip Code Las Vegas NV 89121-5066 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> IE060505.0010139 Amount of Each Receipt this Period 250.00
Name of Employer Occupation Comfort Care In Home Inc. President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1157 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Ms. Eveline Parchem

Mailing Address 6411 N Cicero Ave

City State Zip Code  
Lincolnwood IL 60712-3407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Evelines Hair Elite. Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

**Transaction ID:** IE060505.0010140

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael H. Ramos

Mailing Address 7812 NW 73rd Ave

City State Zip Code  
Tamarac FL 33321-4951

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MHR Industries Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

**Transaction ID:** IE060505.0010145

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Victor W. Wheelock

Mailing Address 2170 Wayne Rd

City State Zip Code  
Chambersburg PA 17201-8867

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wheelock Hatchery Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5100.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

**Transaction ID:** IE060505.0010146

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1158 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David R. Van Bibber		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 6321 Vicuna Dr		<b>Transaction ID:</b> IE060505.0010147
City State Zip Code Las Vegas NV 89146-3007	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 626.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Shari Haling		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 4460 Camino Real Way Ste 2		<b>Transaction ID:</b> IE060505.0010148
City State Zip Code Fort Myers FL 33912-1050	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Professional Team Mortgage Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Tania Kerr		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 1133 N Main St		<b>Transaction ID:</b> IE060505.0010150
City State Zip Code Pocatello ID 83204-2717	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Consumer Care LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1159 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Victoria Strycharske

Mailing Address 10108 Londonshire Ln

City State Zip Code  
Tampa FL 33647-3173

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Starr Solutions Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010155

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Barbara J. Van Boskerck

Mailing Address 2754 Rosselle St

City State Zip Code  
Jacksonville FL 32205-5676

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Starlings Fuel Service Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010157

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Daisy Li

Mailing Address 1169 Market St  
Ste 805

City State Zip Code  
San Francisco CA 94103-1539

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Moonstar Restaurant Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010158

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1160 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sheree Banet

Mailing Address 3826 Hamburg Pike Ste B

City Jeffersonville State IN Zip Code 47130-9668

FEC ID number of contributing federal political committee. **C**

Name of Employer: Smokey's Discount Tobacco Outlet Inc. Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: IE060505.0010161

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Maxine Dittmar

Mailing Address 204 E Townline Rd

City Lena State IL Zip Code 61048-9701

FEC ID number of contributing federal political committee. **C**

Name of Employer: Mickies Building Service Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: IE060505.0010162

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Dixie H. Stewart

Mailing Address 3055 Vineville Ave

City Macon State GA Zip Code 31204-2460

FEC ID number of contributing federal political committee. **C**

Name of Employer: Ship & Shore Travel Agency Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: IE060505.0010163

Amount of Each Receipt this Period  
 700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1161 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Billinda Longino		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 221 W 6th St		<b>Transaction ID:</b> IE060505.0010166	
City State Zip Code Ferris TX 75125-2503	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A Bundle Love Flowers & Gifts	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Catherine D. Brobst		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 815 Inverness Ave		<b>Transaction ID:</b> IE060505.0010168	
City State Zip Code Louisville KY 40214-1224	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Brobst Manor LLC	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Steven P. Straus		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 8400 N New Braunfels Ave		<b>Transaction ID:</b> IE060505.0010170	
City State Zip Code San Antonio TX 78209-1115	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Barn Door Restaurant and Meat Mkt.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1162 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Deborah D. Robinson  
 Mailing Address 4330 Clayton Rd Ste I  
 City State Zip Code  
 Concord CA 94521-2866  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Robinson's Cosmetology Owner  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6  
**Transaction ID:** IE060505.0010171  
 Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Brent R. Marchant  
 Mailing Address 5107 Otters Den Trl  
 City State Zip Code  
 Sanford FL 32771-8029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Hands On Real Estate Owner  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6  
**Transaction ID:** IE060505.0010173  
 Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Keith Ward  
 Mailing Address PO Box 654  
 City State Zip Code  
 Waimanalo HI 96795-0654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Keneke's Full Service Catering President  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6  
**Transaction ID:** IE060505.0010176  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1163 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Chip Faucette		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 2998 Kodiak Ct		<b>Transaction ID:</b> IE060505.0010177	
City State Zip Code Marietta GA 30062-1543	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Roofing Systems	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kamran Saadatjoo		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 1229 Johnson Ferry Rd Ste 204C		<b>Transaction ID:</b> IE060505.0010178	
City State Zip Code Marietta GA 30068-5416	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer S Q Data Corp.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jose D. Reque		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 810 Richards St Ste 990		<b>Transaction ID:</b> IE060505.0010179	
City State Zip Code Honolulu HI 96813-4722	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Medx LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1164 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David Bellaire

Mailing Address 425 S 48th St

City State Zip Code  
Phoenix AZ 85034-3111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bellaire Equip. Co. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010181

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Edna Isaacs

Mailing Address 6108 Canoe Ct

City State Zip Code  
Flowery Branch GA 30542-5647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Isaacs's sales Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010182

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Eugene Miller

Mailing Address 2510 Washington St NW # A

City State Zip Code  
Huntsville AL 35811-1646

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Quality Testing Service LLC Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: IE060505.0010187

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1165 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Kelly Crestani</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 8543 Redwood Rd Ste C		<b>Transaction ID:</b> IE060505.0010189	
City State Zip Code West Jordan UT 84088-9317	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Trio Capital LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. G. E. Macy</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 7150 Dixie Hwy Ste 1		<b>Transaction ID:</b> IE060505.0010190	
City State Zip Code Clarkston MI 48346-2068	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ed Macy Insurance Agency	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Danny L. Sanders</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address PO Box 3837		<b>Transaction ID:</b> IE060505.0010192	
City State Zip Code Tuba City AZ 86045-3837	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Valley Ridge Mortuary	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1166 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Aquilino St Malo

Mailing Address 7230 NW 109th Ct

City State Zip Code  
Doral FL 33178-3763

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ets Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010193

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gary Fowler

Mailing Address 12406 NE 60th Way

City State Zip Code  
Vancouver WA 98682-5972

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Eagle West Financial Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010200

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Doug Brown

Mailing Address 650 Verbenia Dr

City State Zip Code  
Satellite Beach FL 32937-2507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Real Estate Relief Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: IE060505.0010202

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1167 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Dana Weihman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 15964 White Oaks Dr		<b>Transaction ID:</b> IE060505.0010205
City State Zip Code Lake Oswego OR 97035-4200	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Pacesetters Intl.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Dickson K. Costa		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 728 Hoomau St		<b>Transaction ID:</b> IE060505.0010206
City State Zip Code Wailuku HI 96793-9421	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Dickson Costa LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Kelly R. Thorp		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 4665 Haygood Rd Ste 401		<b>Transaction ID:</b> IE060508.0010004
City State Zip Code Virginia Beach VA 23455-5443	Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Atlantic Commtech Corp.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1168 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul J. Bulger

Mailing Address 1767 Business Center Dr

City Reston State VA Zip Code 20190-5355

FEC ID number of contributing federal political committee. **C**

Name of Employer 3h Technology LLC Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: IE060508.0010007

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Susan B. Prophet

Mailing Address 2621 S Orlando Dr Ste 3

City Sanford State FL Zip Code 32773-5325

FEC ID number of contributing federal political committee. **C**

Name of Employer Susan Prophet Best Bail Bonds Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: IE060508.0010008

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Cary L. Hise

Mailing Address 3230 Camp Bowie Blvd Ste A

City Fort Worth State TX Zip Code 76107-2700

FEC ID number of contributing federal political committee. **C**

Name of Employer Nation Wide By Owner Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: IE060508.0010010

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1169 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Jeanne R. Martin

Mailing Address 5430 Fredericksburg Rd

City State Zip Code  
San Antonio TX 78229-3539

FEC ID number of contributing federal political committee. **C**

Name of Employer Career Quest Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010011

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Misti Morningstar

Mailing Address 10 E Church St

City State Zip Code  
Frederick MD 21701-5402

FEC ID number of contributing federal political committee. **C**

Name of Employer Morningstar Design Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010012

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Dawn Cattermole

Mailing Address 95 S 1400 W

City State Zip Code  
Lindon UT 84042-1671

FEC ID number of contributing federal political committee. **C**

Name of Employer All American Gymnastics & Dance Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010013

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1170 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Peter B. Johnson

Mailing Address 200 South St Ste 4

City State Zip Code  
Morristown NJ 07960-5370

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Transmar Commodity Group Ltd. Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010015

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Russell Posey

Mailing Address 1001 Centre Ave

City State Zip Code  
Fort Collins CO 80526-6047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Russell Posey DDS President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010016

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Cynthia Koury-Schelby

Mailing Address 1307 Rio Grnde Blvd NW Ste 8

City State Zip Code  
Albuquerque NM 87104-2690

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rio Grande Wellness, LLC Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010017

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1171 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Miss Darlene Miller

Mailing Address 7434 Michigan Rd

City Indianapolis State IN Zip Code 46268-2316

FEC ID number of contributing federal political committee. **C**

Name of Employer Harmony Child Care Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	8	/	2	0	0	6

Transaction ID: IE060508.0010018

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Randy E. Walker

Mailing Address PO Box 1134

City Glen Saint Mary State FL Zip Code 32040-1134

FEC ID number of contributing federal political committee. **C**

Name of Employer Stoneworks USA Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	8	/	2	0	0	6

Transaction ID: IE060508.0010020

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Laura L. Burd

Mailing Address 898 Airport Park Rd Ste 206A

City Glen Burnie State MD Zip Code 21061-2582

FEC ID number of contributing federal political committee. **C**

Name of Employer Maryland Title Works Unli-  
mited Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	8	/	2	0	0	6

Transaction ID: IE060508.0010023

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1172 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Hae S. Koh

Mailing Address 1 Turtle Ln  
Ste 8

City State Zip Code  
Guilford CT 06437-4356

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Oasis Spa Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010024

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Timothy M. Stranahan

Mailing Address 4214 Medical Pkwy Ste 209

City State Zip Code  
Austin TX 78756-3323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Touch of Life Chiropractic Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010025

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Bishop

Mailing Address 1352 W Riverview Ave

City State Zip Code  
Dayton OH 45402-6215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dayton Christian Center Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010027

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1173 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles L. Parkhurst

Mailing Address PO Box 10850

City State Zip Code  
Prescott AZ 86304-0850

FEC ID number of contributing federal political committee. **C**

Name of Employer Charles Parkhurst Rare Books Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010028

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Rick Andersen

Mailing Address 16 Pitkin St

City State Zip Code  
East Hartford CT 06108-3323

FEC ID number of contributing federal political committee. **C**

Name of Employer Associates Security Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010029

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Kelly A. Isley

Mailing Address 5900 N Granite Reef Rd Ste 100

City State Zip Code  
Scottsdale AZ 85250-6280

FEC ID number of contributing federal political committee. **C**

Name of Employer Corcoran Associates Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010030

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1174 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John H. Cain

Mailing Address 2878 Shoals Rd

City Pinnacle State NC Zip Code 27043-9280

FEC ID number of contributing federal political committee. **C**

Name of Employer John H. Cain Garage Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: IE060508.0010032

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Wade Bennett

Mailing Address PO Box 127

City Welch State TX Zip Code 79377-0127

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: IE060508.0010036

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Moe Hakssa

Mailing Address 27750 S Dixie Hwy

City Homestead State FL Zip Code 33032-8222

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: IE060508.0010037

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1150.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1175 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Dianne Hornberger

Mailing Address 1140 2nd St Ste D

City State Zip Code  
Brentwood CA 94513-2239

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dianne Hornberger DDS Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010039

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Bonnie Megowan

Mailing Address 4221 Hopkins Lake Dr

City State Zip Code  
Duluth GA 30096-4557

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bonika Shears Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010041

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frank K. Lee

Mailing Address 3660 Wilshire Blvd Ste 826

City State Zip Code  
Los Angeles CA 90010-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
C N A Investment & Consulting Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010044

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1176 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Keith Porasky</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 72 S Wyoming Ave		<b>Transaction ID: IE060508.0010045</b>	
City Edwardsville	State PA	Amount of Each Receipt this Period 250.00	
Zip Code 18704-3102			
FEC ID number of contributing federal political committee. C			
Name of Employer B-Met. Endoscopic, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Susan Houde-Walter</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 3495 Winton Pl		<b>Transaction ID: IE060508.0010046</b>	
City Rochester	State NY	Amount of Each Receipt this Period 700.00	
Zip Code 14623-2824			
FEC ID number of contributing federal political committee. C			
Name of Employer Lasermx, Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ken Tharp</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 13480 US Highway 40		<b>Transaction ID: IE060508.0010048</b>	
City Highland	State IL	Amount of Each Receipt this Period 400.00	
Zip Code 62249-4852			
FEC ID number of contributing federal political committee. C			
Name of Employer Schantz & Sons Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1177 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. C.Thomas Tucker

Mailing Address 1106 Fountain Lake Dr

City State Zip Code  
Brunswick GA 31525-3039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nephrology & Endocrinology CN Physician

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010049

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Deborah Pico

Mailing Address 12-18 River Rd Ste 5

City State Zip Code  
Fair Lawn NJ 07410-1842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Myers & Pico Partner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010050

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Hong V. Dinh

Mailing Address 3980 Thurmond Tanner Rd

City State Zip Code  
Flowery Branch GA 30542-2800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
H D Mach. Co. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010052

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1178 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert Weiner		Date of Receipt MM / DD / YYYY 05 / 08 / 2006
Mailing Address 803 Sansom St		<b>Transaction ID:</b> IE060508.0010053
City Philadelphia	State PA	Zip Code 19107-5105
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer Robert Lance Jewelers	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David M. Thomas		Date of Receipt MM / DD / YYYY 05 / 08 / 2006
Mailing Address 281 Joelson Rd		<b>Transaction ID:</b> IE060508.0010055
City Umpqua	State OR	Zip Code 97486-9708
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer Garden Valley Academy	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Don Bradley		Date of Receipt MM / DD / YYYY 05 / 08 / 2006
Mailing Address 11211 Forest Crown		<b>Transaction ID:</b> IE060508.0010057
City Live Oak	State TX	Zip Code 78233-4367
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 600.00
Name of Employer Bradco Auto Glass	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1179 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jerry Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 14500 Central Ave SW		<b>Transaction ID:</b> IE060508.0010058	
City State Zip Code Albuquerque NM 87121-1450	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Laguna Development Corp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Fred Bolanos		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 325 E Arrow Hwy Ste 506		<b>Transaction ID:</b> IE060508.0010060	
City State Zip Code San Dimas CA 91773-3365	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer American Business Machines Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Carl Folkman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 1159		<b>Transaction ID:</b> IE060508.0010061	
City State Zip Code Crystal Beach FL 34681-1159	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Florida Wine & Spirits	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1180 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Terienarine Ramnarine

Mailing Address 11408 101st Ave

City State Zip Code  
Jamaica NY 11419-1139

FEC ID number of contributing federal political committee. **C**

Name of Employer  
T M T Ramnarine Realty Co-  
rp.

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010062

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Dennis Schlabach

Mailing Address 81 Logsdon Ave

City State Zip Code  
Millersburg OH 44654-1488

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Dennis Schlabach Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010064

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Suzanne Drysdale

Mailing Address 1817 Flatbush Ave

City State Zip Code  
Brooklyn NY 11210-4838

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Drysdale & Associates

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010065

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1181 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Ronald C. Storey		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 6896 Highway 243 N		Transaction ID: IE060508.0010067	
City State Zip Code Marvell AR 72366-9771	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Storey Farms Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Pauline N. Gregorio		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 13731 Falmouth Dr		Transaction ID: IE060508.0010068	
City State Zip Code Tustin CA 92780-5219	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gregorio Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Santiago Montoya		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 311 E Sheridan Ave Lot 2		Transaction ID: IE060508.0010069	
City State Zip Code Woodland Park CO 80863-1171	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Eagle Painting Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1182 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Phillip Olviridge		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 7000 Merrill Ave Box 31		<b>Transaction ID:</b> IE060508.0010070	
City State Zip Code Chino CA 91710-9091	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bus. & Coach Int	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Julianne Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 3322 N Anthony Blvd		<b>Transaction ID:</b> IE060508.0010071	
City State Zip Code Fort Wayne IN 46805-2232	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bead Source	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. R. Marriott		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 4930 Encinita Ave		<b>Transaction ID:</b> IE060508.0010072	
City State Zip Code Temple City CA 91780-3705	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Westrep Enterprises	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1183 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Henry Wiatrowski		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 74150 10th Ave		<b>Transaction ID:</b> IE060508.0010073	
City State Zip Code South Haven MI 49090-9464	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Badger Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Terry Gibson		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 10950 Ford Ave		<b>Transaction ID:</b> IE060508.0010075	
City State Zip Code Richmond Hill GA 31324-3907	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Heating & Air Conditioning Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Scoop Scanlon		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 130 Ed Scanlon Ln		<b>Transaction ID:</b> IE060508.0010076	
City State Zip Code Seffner FL 33584-5379	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Teds Septic Tanks Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1184 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Erik Ortega</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 600 Silverwood St		<b>Transaction ID:</b> IE060508.0010077	
City State Zip Code Imperial CA 92251-8922	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Baja Petroleum Administrator	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Dr. Freddy V. Rimpsey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 219 E 21st St		<b>Transaction ID:</b> IE060508.0010079	
City State Zip Code Anniston AL 36207-3211	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Victory Mortgage CEO	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Ron Culbreth</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 19 Meigs Dr		<b>Transaction ID:</b> IE060508.0010084	
City State Zip Code Shalimar FL 32579-2193	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Sign Link Communications Inc. Owner	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1185 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Maryevonne Brooks

Mailing Address PO Box 1170

City Johnson City State TX Zip Code 78636-1170

FEC ID number of contributing federal political committee. **C**

Name of Employer Mainstreet Boutique Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: IE060508.0010085

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel M. Kim

Mailing Address 10602 N Trademark Pkwy Ste 505

City Rch Cucamonga State CA Zip Code 91730-5937

FEC ID number of contributing federal political committee. **C**

Name of Employer Performance 1 Taekwondo Fitness Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: IE060508.0010087

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jeremy D. Wehby

Mailing Address 1110 S Flamingo Rd

City Davie State FL Zip Code 33325-4408

FEC ID number of contributing federal political committee. **C**

Name of Employer Grounds Group Land Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
05 / 08 / 2006

Transaction ID: IE060508.0010091

Amount of Each Receipt this Period  
600.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1186 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John Jenkins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 87 Eastman St		<b>Transaction ID:</b> IE060508.0010093	
City South Easton	State MA	Amount of Each Receipt this Period 250.00	
Zip Code 02375-6200			
FEC ID number of contributing federal political committee. C			
Name of Employer Cas. of New England	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Juan F. Martinez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1731 Windsor Pl		<b>Transaction ID:</b> IE060508.0010094	
City Palmdale	State CA	Amount of Each Receipt this Period 250.00	
Zip Code 93551-4063			
FEC ID number of contributing federal political committee. C			
Name of Employer E & F Grandsons Trucking	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Minister Keith W. Jackson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1639 Keeaumoku St Ste 216		<b>Transaction ID:</b> IE060508.0010100	
City Honolulu	State HI	Amount of Each Receipt this Period 125.00	
Zip Code 96822-4311			
FEC ID number of contributing federal political committee. C			
Name of Employer Teen Challenge of The Hawaiian Isla	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	625.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1187 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Leo P. Grover</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2511 Del Monte St		<b>Transaction ID: IE060508.0010101</b>	
City <b>West Sacramento</b>	State <b>CA</b>	Zip Code <b>95691-3849</b>	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pinnacle Emergency Mgmt., Inc.	Occupation <b>President</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Andrew Senan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address PO Box 1065		<b>Transaction ID: IE060508.0010102</b>	
City <b>Inwood</b>	State <b>WV</b>	Zip Code <b>25428-1065</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ab PRE Owned Auto and Truck	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. William Bradley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 310 Peach Lake Rd		<b>Transaction ID: IE060508.0010103</b>	
City <b>Brewster</b>	State <b>NY</b>	Zip Code <b>10509-1715</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer New England Equine Practice	Occupation <b>Doctor</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1188 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Dr. Darlene McConathy</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 1220 N Velasco St		<b>Transaction ID: IE060508.0010104</b>	
City State Zip Code Angleton TX 77515-3010	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Darlene McConathy DDS	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Shirley Freeman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 5431 Arbor Oak Ln		<b>Transaction ID: IE060508.0010105</b>	
City State Zip Code Raleigh NC 27616-6123	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer C & S Carpet and Upholste-ry Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. An G. Hinds</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 300 Wildwood Ave		<b>Transaction ID: IE060508.0010107</b>	
City State Zip Code Woburn MA 01801-6819	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Catherine Hinds Co.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1189 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Franziska Smith

Mailing Address 25221 Bernwood Dr Ste 4

City State Zip Code  
Bonita Springs FL 34135-7805

FEC ID number of contributing federal political committee. **C**

Name of Employer Assist 2 Sell Buyers & Sellers 1st  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010110

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mac Baggett

Mailing Address 4781 Highway 41 N

City State Zip Code  
Springfield TN 37172-5843

FEC ID number of contributing federal political committee. **C**

Name of Employer Baggett Grains  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010111

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Cheryl E. Kemeny

Mailing Address 12 June Ave

City State Zip Code  
Norwalk CT 06850-2534

FEC ID number of contributing federal political committee. **C**

Name of Employer Crystal Theatre Inc.  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010114

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1190 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Irene Bahrami</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 400 E 57th St Apt 10B		<b>Transaction ID: IE060508.0010119</b>	
City State Zip Code New York NY 10022-3024	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lexus Development Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Frances Heard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 600 E Main St		<b>Transaction ID: IE060508.0010121</b>	
City State Zip Code Allen TX 75002-3033	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Brooke Insurance	Occupation Principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. William J. Lent</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1253 W 9th St		<b>Transaction ID: IE060508.0010122</b>	
City State Zip Code Upland CA 91786-5706	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Diamond Industries	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1191 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Michele S. Hirschfield		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 7395 Juniper Rd		<b>Transaction ID:</b> IE060508.0010129	
City Lexington	State MI	Amount of Each Receipt this Period 150.00	
Zip Code 48450-8951		Transaction ID: IE060508.0010129	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Proactive Resolutions LLC	Occupation Owner	Amount of Each Receipt this Period 150.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Clark Gustavson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1442 W 1500 S		<b>Transaction ID:</b> IE060508.0010134	
City Vernal	State UT	Amount of Each Receipt this Period 150.00	
Zip Code 84078-4620		Transaction ID: IE060508.0010134	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Clarks Custom Concrete	Occupation Owner	Amount of Each Receipt this Period 150.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 150.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John R. Schappell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 6397 Route 309		<b>Transaction ID:</b> IE060508.0010135	
City New Tripoli	State PA	Amount of Each Receipt this Period 500.00	
Zip Code 18066-2035		Transaction ID: IE060508.0010135	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Northwestern Grill	Occupation Owner	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	800.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1192 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Karen A. Diebold

Mailing Address 434 Gandervalley Ln

City State Zip Code  
Lexington TN 38351-5769

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Future Services Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: IE060508.0010136

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Randy W. Shuster

Mailing Address 3002 Sharer Rd

City State Zip Code  
Tallahassee FL 32312-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shuster's Cafe Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: IE060508.0010138

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Clark East

Mailing Address 5509 W Gray St

City State Zip Code  
Tampa FL 33609-1053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Central Development Enterprises Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: IE060508.0010139

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 900.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1193 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Charles Mims		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 2121 I St		<b>Transaction ID:</b> IE060508.0010140	
City State Zip Code Rio Linda CA 95673-4524	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mims Group	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Billy C. Newton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1251 Georgetown Rd		<b>Transaction ID:</b> IE060508.0010141	
City State Zip Code Lexington KY 40511-1067	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Southern Industrial LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Donald Hullenbaugh		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1050 S Cedar Crest Blvd		<b>Transaction ID:</b> IE060508.0010143	
City State Zip Code Allentown PA 18103-5454	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Donald Hullenbaugh Insurance Agency	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1194 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Will Jordan

Mailing Address 608 W Church St

City Greenwood State MS Zip Code 38930-4240

FEC ID number of contributing federal political committee. **C**

Name of Employer B & W Transport, Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010145

Amount of Each Receipt this Period  
 1250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sharon A. Weremy

Mailing Address 3108 N 54th St

City Omaha State NE Zip Code 68104-3530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010146

Amount of Each Receipt this Period  
 150.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Ira I. Kramer

Mailing Address 598 Broadway 2nd Fl  
2nd Fl

City New York State NY Zip Code 10012-3206

FEC ID number of contributing federal political committee. **C**

Name of Employer N.Y.C.A.T.S., Inc. Occupation Doctor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010147

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1195 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Katharine Ridenour		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 476 Old Middlesboro Hwy		<b>Transaction ID:</b> IE060508.0010148	
City State Zip Code La Follette TN 37766-7217	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Business Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Samuel J. Mowery		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 348 Blake Dr		<b>Transaction ID:</b> IE060508.0010149	
City State Zip Code Ozark AL 36360-6216	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. John Miner		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address 927 Washington Ave		<b>Transaction ID:</b> IE060508.0010152	
City State Zip Code Ocean Springs MS 39564-4639	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Self Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1196 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Nick Wright		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2827 Saratoga Ave		<b>Transaction ID:</b> IE060508.0010155
City State Zip Code Lake Havasu City AZ 86406-6956	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer God's Grace Church	Occupation Pastor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Edward A. Ganja		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 3506 Glenlake Dr		<b>Transaction ID:</b> IE060508.0010156
City State Zip Code Glenview IL 60026-1370	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Harold D. Beckman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 3226 Stickney Creek Rd		<b>Transaction ID:</b> IE060508.0010157
City State Zip Code Cascade MT 59421-8248	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1197 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Clifford A. Lenz, Sr.  
Mailing Address PO Box 181592  
City State Zip Code  
Coronado CA 92178-1592  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6  
Transaction ID: IE060508.0010158  
Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steven G. Kraemer  
Mailing Address 9 Crows Nest Rd  
City State Zip Code  
Bronxville NY 10708-4801  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bear, Stearns Occupation Trader  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼  
965.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6  
Transaction ID: IE060508.0010161  
Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Rodney J. Fernandes  
Mailing Address PO Box 40121  
City State Zip Code  
New Bedford MA 02744-0002  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Boston Coffee & Bagel Occupation Owner  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 6  
Transaction ID: IE060508.0010162  
Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1198 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Maurice J. Reese

Mailing Address 713 Lakewood Blvd

City State Zip Code  
Madison WI 53704-6048

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5600.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010164

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gen Inomata

Mailing Address 1811 Kaiser Ave

City State Zip Code  
Irvine CA 92614-5707

FEC ID number of contributing federal political committee. **C**

Name of Employer Fancl Intl. Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010165

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lauren J. Geiger

Mailing Address 13980 W Hillsborough Ave

City State Zip Code  
Tampa FL 33635-9656

FEC ID number of contributing federal political committee. **C**

Name of Employer Cuban Breezes, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010166

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1199 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Julie Garrison</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 119 N Vine St Ste A		Transaction ID: IE060508.0010170	
City State Zip Code Plainfield IN 46168-1148	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Concepts Styling Salon	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Kobi Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 5608 S Durango St		Transaction ID: IE060508.0010172	
City State Zip Code Tacoma WA 98409-2621	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Tacoma Vet Imaging	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Clara Fazzino</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 884 Manor Rd		Transaction ID: IE060508.0010173	
City State Zip Code Staten Island NY 10314-7005	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A & C Superette	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1200 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dyna D. Nhek

Mailing Address 1740 Spring St Ste A

City Paso Robles State CA Zip Code 93446-1637

FEC ID number of contributing federal political committee. **C**

Name of Employer Dk's Donuts Occupation Owner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010176

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Terry L. Bragg

Mailing Address 495 W Riverside Dr

City Mc Connelville State OH Zip Code 43756-1274

FEC ID number of contributing federal political committee. **C**

Name of Employer Terry Bragg & Sons Inc. Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010178

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Maria R. De Orozco

Mailing Address 1550 W 84th St Ste 75

City Hialeah State FL Zip Code 33014-3376

FEC ID number of contributing federal political committee. **C**

Name of Employer Mendez Auto Tag Agency In-c. Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 6

Transaction ID: IE060508.0010180

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1201 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Mary Gray

Mailing Address 995 S Creasy Ln

City State Zip Code  
Lafayette IN 47905-4800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cat Care Veterinarian

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010182

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Shelley J. Paulson

Mailing Address 4 Parkway N

City State Zip Code  
Deerfield IL 60015-2502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ovation Pharmaceuticals Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010188

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Darrell L. Elliott

Mailing Address 2817 Meadowside Dr

City State Zip Code  
McKinney TX 75071-3417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Computer Store President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010190

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1202 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Debbie Olmsted

Mailing Address 5575 State Route 28N

City State Zip Code  
Newcomb NY 12852-2159

FEC ID number of contributing federal political committee. **C**

Name of Employer Stans Centerpond Camp Ground  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010191

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David Ventura

Mailing Address 15495 Grumman Ct

City State Zip Code  
Wellington FL 33414-8301

FEC ID number of contributing federal political committee. **C**

Name of Employer Grafpap Inc.  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010192

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David Kunz

Mailing Address 15776 Main St Ste 24

City State Zip Code  
Hesperia CA 92345-3406

FEC ID number of contributing federal political committee. **C**

Name of Employer High Desert Communitis Investments  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: IE060508.0010201

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1203 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold J. Pendergrass  
 Mailing Address 760 Maritime St  
 City State Zip Code  
 Oakland CA 94607-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Harold Pendergrass Atty. Occupation Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6  
**Transaction ID:** IE060508.0010207  
 Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark Kelly  
 Mailing Address 811 North St  
 City State Zip Code  
 Endicott NY 13760-5127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VMR Electronics LLC Occupation Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6  
**Transaction ID:** IE060508.0010208  
 Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles Dewitt  
 Mailing Address 2501 Old Cherry Point Rd  
 City State Zip Code  
 New Bern NC 28560-6777  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Meineke Car Care Center Occupation Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6  
**Transaction ID:** IE060508.0010221  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1204 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Daryl Scott

Mailing Address 297 NW Brown Rd

City State Zip Code  
Lake City FL 32055-7500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: IE060508.0010222

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David D. Wallace, II

Mailing Address 9631 Liberty Rd Ste P

City State Zip Code  
Randallstown MD 21133-2434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Chesapeake Kitchen Wholesalers President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: IE060508.0010224

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Cynthia G. Kasnia

Mailing Address 942 Route 376

City State Zip Code  
Wappingers Falls NY 12590-6483

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cynthia G Kasnia Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2006

Transaction ID: IE060509.0010004

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1205 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Bryan Stewart		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 17150 Via Del Campo Ste 305		<b>Transaction ID:</b> IE060509.0010005	
City State Zip Code San Diego CA 92127-2138	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Atm Express	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Jai P. Sharma		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 21515 Jamaica Ave		<b>Transaction ID:</b> IE060509.0010011	
City State Zip Code Queens Village NY 11428-1715	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Service First NY Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Beverly Church		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 712 S Pearl St		<b>Transaction ID:</b> IE060509.0010013	
City State Zip Code Denver CO 80209-4213	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer United Management	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1206 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Andreas R. Gfesser

Mailing Address 4540 W 51st St

City State Zip Code  
Chicago IL 60632-4554

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Trender Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: IE060509.0010020

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bobby R. Conner

Mailing Address PO Box 2809

City State Zip Code  
Gastonia NC 28053-2809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conner Brothers Mach. Co. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: IE060509.0010021

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jack Anders

Mailing Address PO Box 302

City State Zip Code  
Independence VA 24348-0302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pair of Jacks Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: IE060509.0010022

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1207 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John M. Dedman

Mailing Address 325 Warrior Dr  
Apt 24

City Murfreesboro State TN Zip Code 37128-5957

FEC ID number of contributing federal political committee. **C**

Name of Employer D & D Concepts Occupation Owner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2006

Transaction ID: IE060509.0010024

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Helen Lenzsch

Mailing Address 207 Atlantic Ave

City Somers Point State NJ Zip Code 08244-2150

FEC ID number of contributing federal political committee. **C**

Name of Employer Lenzsch Ent. Inc. Occupation Owner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2006

Transaction ID: IE060509.0010025

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Ofelia I. Guiel

Mailing Address 8301 E 11th Ct

City Anchorage State AK Zip Code 99504-2210

FEC ID number of contributing federal political committee. **C**

Name of Employer Christian Cottage Assisted Living Occupation Owner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2006

Transaction ID: IE060509.0010026

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1208 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ariel Munoz</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2006
Mailing Address 6801 Lake Worth Rd Ste 334		<b>Transaction ID:</b> IE060509.0010027
City Greenacres	State FL	Zip Code 33467-2974
FEC ID number of contributing federal political committee.	C	
Name of Employer A & M Accounting & Paralegal Service	Occupation Vice President	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. Paula L. Mazzoni</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2006
Mailing Address 2590 Lindell Rd Ste 400		<b>Transaction ID:</b> IE060509.0010029
City Las Vegas	State NV	Zip Code 89146-5475
FEC ID number of contributing federal political committee.	C	
Name of Employer Sastum Wellness Center	Occupation Owner	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Jonnathan Kim</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2006
Mailing Address 3322 Memorial Pkwy SW Ste 705		<b>Transaction ID:</b> IE060509.0010032
City Huntsville	State AL	Zip Code 35801-5368
FEC ID number of contributing federal political committee.	C	
Name of Employer Gan Corp.	Occupation President	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1209 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Armster Bruner, Jr.

Mailing Address 103 Lone Oak Dr

City State Zip Code  
Nicholasville KY 40356-8925

FEC ID number of contributing federal political committee. **C**

Name of Employer: Armster Bruner Jr. Real Estate  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: IE060509.0010035

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jesse Camacho

Mailing Address PO Box 36887

City State Zip Code  
Indianapolis IN 46236-0887

FEC ID number of contributing federal political committee. **C**

Name of Employer: Camacho Equip. & Janitr Supply  
Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: IE060509.0010036

Amount of Each Receipt this Period  
600.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Raymond Crews

Mailing Address 500 S Johnson St

City State Zip Code  
Samson AL 36477-1846

FEC ID number of contributing federal political committee. **C**

Name of Employer: Crews BBQ & Grill Inc.  
Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: IE060509.0010039

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1210 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Marlene A. Heintzelman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 3601 S Atherton St		<b>Transaction ID: IE060509.0010040</b>	
City State Zip Code State College PA 16801-8302	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sprouting Tree Childrens Center	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Wayne R. Hannah, III</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 744 N Wells St		<b>Transaction ID: IE060509.0010041</b>	
City State Zip Code Chicago IL 60610-3521	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer TSG Real Estate, LLC	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Elizabeth A. Fabrizio</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 2150 Lake Ida Rd Ste 6		<b>Transaction ID: IE060509.0010042</b>	
City State Zip Code Delray Beach FL 33445-2443	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Professional Touch Rehab. Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1211 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Natalia Gordon

Mailing Address 50 Leanni Way Unit B2

City State Zip Code  
Palm Coast FL 32137-4754

FEC ID number of contributing federal political committee. **C**

Name of Employer 1st Point Realty Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: IE060509.0010043

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Edward A. Heberer

Mailing Address 7 Arbutus Ct

City State Zip Code  
Commack NY 11725-4321

FEC ID number of contributing federal political committee. **C**

Name of Employer American Wood Installers Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: IE060509.0010044

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Jonnie E. Gallinger

Mailing Address 4146 143rd St

City State Zip Code  
Chippewa Falls WI 54729-8814

FEC ID number of contributing federal political committee. **C**

Name of Employer Gallinger Center For Effective Educ. Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: IE060509.0010045

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1212 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kevin Durand

Mailing Address 13 Massachusetts Ave

City State Zip Code  
Harvard MA 01451-1639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Infussafe LLC President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

**Transaction ID:** IE060509.0010046

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Huitok Chon

Mailing Address 26218 Cuyahoga Cir

City State Zip Code  
San Antonio TX 78258-2569

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fantastic Shot CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

**Transaction ID:** IE060509.0010047

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Michael P. Ruggiero

Mailing Address 2000 Shore Rd Ste 104

City State Zip Code  
Linwood NJ 08221-2100

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Coastal Wellness LLC Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

**Transaction ID:** IE060509.0010048

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1213 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Donna Kohlhasse

Mailing Address 6836 E Brown Rd  
Ste 101

City State Zip Code  
Mesa AZ 85207-3756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Donna Kohlhasse Insurance Agency Inc. CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: IE060509.0010049

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Linda Owens

Mailing Address 622 C St

City State Zip Code  
Washougal WA 98671-2154

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Small Business Basics Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: IE060509.0010050

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Greg Sheets

Mailing Address 1681 Republic Rd

City State Zip Code  
Huntingdon Valley PA 19006-1807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Germantown Tool & Mach. Works General Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: IE060509.0010055

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1214 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Patricia Jones</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 4205 Chestnut Ave		<b>Transaction ID:</b> IE060509.0010057	
City State Zip Code Newport News VA 23607-2421	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pat & Associates	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Patricia Harman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 8638 Philips Hwy Ste 8		<b>Transaction ID:</b> IE060509.0010058	
City State Zip Code Jacksonville FL 32256-1210	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer River Oaks Designs	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. George Hart</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1346 W 16th Pl		<b>Transaction ID:</b> IE060509.0010059	
City State Zip Code Yuma AZ 85364-5310	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rapid Entry Systems Technology	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1215 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Andrew R. Collins		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 2626 Manana Dr Ste B		Transaction ID: IE060509.0010062	
City State Zip Code Dallas TX 75220-1343	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Moveline Hospitality	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Mishka J. Peralto		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 128 NW 98th Ter		Transaction ID: IE060509.0010064	
City State Zip Code Plantation FL 33324-7014	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Florida Elite. Auto Sales Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Elaine A. Aguilar		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 765 Baywood Dr Ste 133		Transaction ID: IE060509.0010065	
City State Zip Code Petaluma CA 94954-5507	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Elaine Aguilar at Law	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1216 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Patricia A. Capes

Mailing Address 678 Front Ave NW # 125

City State Zip Code  
Grand Rapids MI 49504-5325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bayshore Contractors LLC President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: IE060509.0010066

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Lorraine Tabraham-Tapias

Mailing Address 423 Lithia Pinecrest Rd

City State Zip Code  
Brandon FL 33511-6138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rains Therapeutic Massage CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: IE060509.0010067

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joseph M. Falkl

Mailing Address 1116 Silent Brook Rd

City State Zip Code  
Wake Forest NC 27587-7138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
JMF Enterprises LLC Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: IE060509.0010069

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1217 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steven M. Kaufman

Mailing Address 9219 Katy Fwy Ste 200

City State Zip Code  
Houston TX 77024-1595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Zeus Mortgage Ltd. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: IE060509.0010071

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jim Strutzenberg

Mailing Address 3100 101st St Ste D

City State Zip Code  
Des Moines IA 50322-3867

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hotsy Cleaning Systems In- c. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: IE060509.0010072

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Sidney Greenberger

Mailing Address 50 Cragwood Rd Ste 212

City State Zip Code  
S Plainfield NJ 07080-2434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Garden State Health Care Group CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 6

Transaction ID: IE060509.0010076

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1218 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Leigh White

Mailing Address 1125 SE Westbrooke Dr Ste D

City State Zip Code  
Waukee IA 50263-8374

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Carrier Access President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

**Transaction ID:** IE060509.0010078

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas J. Tillson

Mailing Address 44 W Illiana St Ste 101

City State Zip Code  
Orlando FL 32806-4439

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Total Interiors of Orlando, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

**Transaction ID:** IE060509.0010079

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jan Bowling

Mailing Address 14 Weston Road Ext

City State Zip Code  
Arden NC 28704-7200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Leafguard of Asheville LLC Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

**Transaction ID:** IE060509.0010080

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1219 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Vivian Brady</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1301 Rivera Ct		<b>Transaction ID:</b> IE060509.0010083	
City State Zip Code Santa Rosa CA 95409-3016	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Rivera Court Guest Home	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Wendell C. Howie</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 54 Hybrook Rd S		<b>Transaction ID:</b> IE060509.0010085	
City State Zip Code Divide CO 80814-9219	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Howie-Kaiser Intl. Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Manuel E. Salgado</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 17234 N 19th Ave Ste 7		<b>Transaction ID:</b> IE060509.0010087	
City State Zip Code Phoenix AZ 85023-2414	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer B2B Hispanic Mktg. Group LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1220 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Sheila King		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 5851 N Seanifer Dr		<b>Transaction ID:</b> IE060509.0010089	
City State Zip Code Tucson AZ 85741-5253	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Tower Realty	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Koreen Adams		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 5139 Saratoga Ave		<b>Transaction ID:</b> IE060509.0010092	
City State Zip Code Cypress CA 90630-4449	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Business Continuity International	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Webb Tutt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address PO Box 1280 401 S Cedar Ave		<b>Transaction ID:</b> IE060509.0010094	
City State Zip Code Demopolis AL 36732-2233	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Demopolis Hardwood Flooring Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1221 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Vivian Brady</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 4668 Los Gatos Ct		<b>Transaction ID:</b> IE060509.0010099	
City State Zip Code Santa Rosa CA 95403-1499	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Health Care Provider Aggregate Year-to-Date ▼ 2650.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Jeaneane B. Duncan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 306 Shadywood Rd		<b>Transaction ID:</b> IE060509.0010100	
City State Zip Code Houston TX 77057-1315	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Investor Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Earline B. Smith</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 3108 Tank Trl		<b>Transaction ID:</b> IE060509.0010101	
City State Zip Code Leesville LA 71446-7088	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1222 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Anthony Warmus</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 707 S Erwin St		<b>Transaction ID:</b> IE060509.0010102	
City Cartersville	State GA	Amount of Each Receipt this Period 2500.00	
Zip Code 30120-4112		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Applies Thermoplastic Resources		Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2800.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. Harold D. Lankrod</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 9 Park Cir		<b>Transaction ID:</b> IE060509.0010103	
City Mexico	State MO	Amount of Each Receipt this Period 150.00	
Zip Code 65265-2331		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Info Requested		Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Bailey N. Hall</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 451 N Main St		<b>Transaction ID:</b> IE060509.0010105	
City Kaysville	State UT	Amount of Each Receipt this Period 2500.00	
Zip Code 84037-1114		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Natures Foundation		Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	5150.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1223 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ernest C. Wega

Mailing Address 1171 Turtle Lake Ct

City State Zip Code  
Ocoee FL 34761-9100

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Chuck Wega Air Condition-  
ing & Heating

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2006

Transaction ID: IE060509.0010107

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Marie Benz

Mailing Address 301 S Woodbine Ave  
# 130

City State Zip Code  
Narberth PA 19072-1525

FEC ID number of contributing federal political committee. **C**

Name of Employer  
DR Marie Benz

Occupation  
Doctor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2006

Transaction ID: IE060509.0010108

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Hubert C. Huh

Mailing Address PO Box 266

City State Zip Code  
Bryn Mawr PA 19010-0266

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Prescott, Forbes, Morgan,  
Hub Assoc.

Occupation  
Chairman, Managing Partner, Chief Exec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2701.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2006

Transaction ID: IE060509.0010110

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1224 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Curt W. Hudelson

Mailing Address PO Box 7622

City State Zip Code  
Long Beach CA 90807-0622

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Bldg Contractor/r.e. Appraiser/investo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: IE060509.0010113

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth Smitherman

Mailing Address 3401 Greensboro Ave Ste 4

City State Zip Code  
Tuscaloosa AL 35401-7705

FEC ID number of contributing federal political committee. **C**

Name of Employer Sitecom Technologies LLC Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: IE060509.0010116

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Lourdes J. Collett

Mailing Address 430 Grand Bay Dr Ph 1C

City State Zip Code  
Key Biscayne FL 33149-1918

FEC ID number of contributing federal political committee. **C**

Name of Employer LJC Mgmt. LLC Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
05 / 09 / 2006

Transaction ID: IE060509.0010117

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1225 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael J. Lewis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1953 E Edgewood Dr		<b>Transaction ID:</b> IE060509.0010119	
City Lakeland	State FL	Amount of Each Receipt this Period 300.00	
Zip Code 33803-3415		Transaction ID: IE060509.0010119	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Advanced Surveying & Mapping	Occupation President	Transaction ID: IE060509.0010119	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Transaction ID: IE060509.0010119	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Kimberly G. Ball		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1715 12th St		<b>Transaction ID:</b> IE060509.0010120	
City Cayce	State SC	Amount of Each Receipt this Period 300.00	
Zip Code 29033-3154		Transaction ID: IE060509.0010120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Checker-Yellow Cab Co. Inc.	Occupation President	Transaction ID: IE060509.0010120	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Transaction ID: IE060509.0010120	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Arlene Lembke		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 807 Knipp Dr		<b>Transaction ID:</b> IE060509.0010124	
City Mascoutah	State IL	Amount of Each Receipt this Period 300.00	
Zip Code 62258-1328		Transaction ID: IE060509.0010124	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Arlene Lembke	Occupation Owner	Transaction ID: IE060509.0010124	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Transaction ID: IE060509.0010124	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	900.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1226 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Jared L. Gee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1301 Berry Dr		<b>Transaction ID: IE060509.0010126</b>	
City State Zip Code Cleburne TX 76033-6926	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pinnacle Air Conditioning and Heating	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Johnny P. Hollomon</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address PO Box 1551		<b>Transaction ID: IE060509.0010128</b>	
City State Zip Code Dothan AL 36302-1551	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Industrial Maintenance Services	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Lawrence Robles</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 5213 Eastridge Ct		<b>Transaction ID: IE060509.0010130</b>	
City State Zip Code Bakersfield CA 93306-2813	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Millennium Financial	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1227 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Rhos B. Dyke</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1140 Monument St		<b>Transaction ID: IE060509.0010131</b>	
City State Zip Code Pacific Palisades CA 90272-2539	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Radioweb	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Randall P. Collins</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 498 7th Ave		<b>Transaction ID: IE060509.0010132</b>	
City State Zip Code New York NY 10018-6798	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Randall P Collins Archite- ct PC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Jeffrey Galpern</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 5030 Champion Blvd # G6-176		<b>Transaction ID: IE060509.0010133</b>	
City State Zip Code Boca Raton FL 33496-2473	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Consolidated Diversified	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1228 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Craig E. Moore		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 2601 Fortune Cir E Ste 300B		<b>Transaction ID:</b> IE060509.0010134
City Indianapolis State IN Zip Code 46241-5567	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Catalyst Inc. Occupation CEO	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Reena Batra		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 1200 W Walnut Hill Ln Ste 1300		<b>Transaction ID:</b> IE060509.0010135
City Irving State TX Zip Code 75038-3050	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Software Professionals In-c. Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Vadim Plotsker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 25 Sundial Ave Ste 404		<b>Transaction ID:</b> IE060509.0010138
City Manchester State NH Zip Code 03103-7244	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Oasys Technology LLC Occupation President	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1229 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jim Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 832 N State Route 1		Transaction ID: IE060509.0010140	
City State Zip Code Milford IL 60953-6347	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Robert Davis & Son Welding	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Carol L. Curran		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 2855 N Franklin Rd Ste A6 # 6		Transaction ID: IE060509.0010141	
City State Zip Code Indianapolis IN 46219-1349	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Phoenix Data Corp.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Xavier Herrera		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 2503 NW Creek Hollar Dr		Transaction ID: IE060509.0010143	
City State Zip Code Lawton OK 73505-1259	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Strike Group Solutions LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1230 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Wayne Garcia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1123 Simonton St		<b>Transaction ID:</b> IE060509.0010147	
City State Zip Code Key West FL 33040-3154	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Wayne Garcia Building Contracting	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles R. Simerley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 152 Bubbles Ln		<b>Transaction ID:</b> IE060509.0010148	
City State Zip Code Ringgold GA 30736-3521	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer C R Simerley Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joseph Basanta		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 160 Broadway Fl 15		<b>Transaction ID:</b> IE060509.0010151	
City State Zip Code New York NY 10038-4208	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Systems Solutions Inc.	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1231 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. David G. Liebl</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address PO Box 1685		<b>Transaction ID: IE060509.0010152</b>	
City Duluth	State GA	Amount of Each Receipt this Period 350.00	
Zip Code 30096-0030			
FEC ID number of contributing federal political committee. C			
Name of Employer David G. Liebl Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Patricia Dali</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 321 Progress Dr		<b>Transaction ID: IE060509.0010153</b>	
City Manchester	State CT	Amount of Each Receipt this Period 300.00	
Zip Code 06042-2296			
FEC ID number of contributing federal political committee. C			
Name of Employer Medical Whse. Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Donald M. Malone</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 7739 Croftwood Dr		<b>Transaction ID: IE060509.0010154</b>	
City Austin	State TX	Amount of Each Receipt this Period 300.00	
Zip Code 78749-3253			
FEC ID number of contributing federal political committee. C			
Name of Employer Security Services of Austin	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1232 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael S. Morano

Mailing Address 318 S Dixie Hwy

City State Zip Code  
West Palm Bch FL 33401-5806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Law Office of Morano Intl. Lawyer  
Pa

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: IE060509.0010157

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Keith Scheidt

Mailing Address 807 Baptiste Dr

City State Zip Code  
Paola KS 66071-1338

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
New Century Dodge CEO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: IE060509.0010159

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Martin Bordson

Mailing Address 1209 Swift Ave

City State Zip Code  
Kansas City MO 64116-4011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Badger Ordiance Owner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: IE060509.0010163

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1233 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Scott Fleury

Mailing Address 50515 Metzen Dr

City State Zip Code  
Chesterfield MI 48051-3137

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Extreme Machining & Engineering LLC

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: IE060509.0010164

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Don Bennett

Mailing Address 2917 SW Topeka Blvd

City State Zip Code  
Topeka KS 66611-2120

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Bennett Sewing Center South

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: IE060509.0010169

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Brian Augustine

Mailing Address 756 Tyvola Rd Ste 126

City State Zip Code  
Charlotte NC 28217-3591

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Elite. Team Realty Inc.

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: IE060509.0010172

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1234 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Bruce Donaldson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 1920 9th St N Ste D		<b>Transaction ID:</b> IE060509.0010174	
City Saint Petersburg	State FL	Amount of Each Receipt this Period 300.00	
Zip Code 33704-4264		Transaction ID: IE060509.0010174	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Ranger Termite and Pest	Occupation Owner	Amount of Each Receipt this Period 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. June S. Kneser		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 14251 Benson St		<b>Transaction ID:</b> IE060509.0010175	
City Overland Park	State KS	Amount of Each Receipt this Period 5000.00	
Zip Code 66221-2176		Transaction ID: IE060509.0010175	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5325.00	Amount of Each Receipt this Period 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jim Beach		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 100 S Kansas Ave		<b>Transaction ID:</b> IE060510.0010002	
City Columbus	State KS	Amount of Each Receipt this Period 250.00	
Zip Code 66725-1702		Transaction ID: IE060510.0010002	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Avedis Group	Occupation CEO	Amount of Each Receipt this Period 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	5550.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1235 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Nelly Forrest</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 2385 NW Executive Center Dr Ste 100		<b>Transaction ID:</b> IE060510.0010003	
City Boca Raton	State FL	Zip Code 33431-8510	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Quantum Financial & Associates Co.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Rose Cramer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 8290 Arville St		<b>Transaction ID:</b> IE060510.0010008	
City Las Vegas	State NV	Zip Code 89139-7114	Amount of Each Receipt this Period 700.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Enterprise Leasing Co.-West		Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Linda B. Minor</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 221 Dogwood Lake Trl		<b>Transaction ID:</b> IE060510.0010009	
City Alpharetta	State GA	Zip Code 30004-2366	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bethany Land Co.		Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3450.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1236 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William C. Hopkins

Mailing Address 2240 Stagecoach Rd

City State Zip Code  
Thomson GA 30824-4753

FEC ID number of contributing federal political committee. **C**

Name of Employer Hopkins Farms      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** IE060510.0010010

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Blitch

Mailing Address PO Box 551509

City State Zip Code  
Jacksonville FL 32255-1509

FEC ID number of contributing federal political committee. **C**

Name of Employer Magellan Educational Services      Occupation CEO

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** IE060510.0010012

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David L. Pepper, Sr.

Mailing Address PO Box 1306

City State Zip Code  
Meeker CO 81641-1306

FEC ID number of contributing federal political committee. **C**

Name of Employer Rocky Mountain Field Service      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** IE060510.0010013

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1237 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Donna Quarles		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1104 E Mulberry St		<b>Transaction ID:</b> IE060510.0010014	
City State Zip Code Angleton TX 77515-3947	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Donna Quarles Photography	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Melissa Bryant		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 512 City Blvd Ste F		<b>Transaction ID:</b> IE060510.0010015	
City State Zip Code Waycross GA 31501-8002	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bryant Realty and Associates	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Julie Proshek		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1811 Palma Plz		<b>Transaction ID:</b> IE060510.0010017	
City State Zip Code Austin TX 78703-3932	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ceska Design LLP	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1238 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dave Daughtry

Mailing Address 200 12th St

City State Zip Code  
Waynesboro VA 22980-4771

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
D & D Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 10 / 2006

Transaction ID: IE060510.0010018

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Phyllis Ross

Mailing Address 24 County Rd

City State Zip Code  
Tenafly NJ 07670-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Samaritan Services Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 10 / 2006

Transaction ID: IE060510.0010019

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James Taylor

Mailing Address 3509 Pickett Rd

City State Zip Code  
Signal Mountain TN 37377-8518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Taylor Car Care Center Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 10 / 2006

Transaction ID: IE060510.0010020

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1239 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul Khanna

Mailing Address 1505 E Broad St

City Statesville State NC Zip Code 28625-4301

FEC ID number of contributing federal political committee. **C**

Name of Employer Nirankari Brothers Statesville LLC Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: IE060510.0010021

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David A. Thatcher

Mailing Address 7 Charles Ct Ste 14

City Annandale State NJ Zip Code 08801-2027

FEC ID number of contributing federal political committee. **C**

Name of Employer Advanced Network Systems LLC Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: IE060510.0010022

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Connie Kullman

Mailing Address 5807 Snowy Orchid Ln

City Allentown State PA Zip Code 18104-8499

FEC ID number of contributing federal political committee. **C**

Name of Employer Zig Zaggles Salon Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 6

Transaction ID: IE060510.0010024

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1240 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Louise Ritley

Mailing Address 10574 Ravenna Rd

City State Zip Code  
Twinsburg OH 44087-3104

FEC ID number of contributing federal political committee. **C**

Name of Employer Corporate Apt. Partners Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

Transaction ID: IE060510.0010025

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Rebecca A. Powers

Mailing Address 14651 S Bascom Ave

City State Zip Code  
Los Gatos CA 95032-2014

FEC ID number of contributing federal political committee. **C**

Name of Employer White Oak Medical Office Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

Transaction ID: IE060510.0010026

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Carl D. Aaron, Jr.

Mailing Address 85 N Congress Ave

City State Zip Code  
Delray Beach FL 33445-3416

FEC ID number of contributing federal political committee. **C**

Name of Employer All Florida Roof System Inc. Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

Transaction ID: IE060510.0010028

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1241 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Thomas E. Jablonski		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 901 Hawthorne Ave		<b>Transaction ID:</b> IE060510.0010030	
City State Zip Code Mechanicsburg PA 17055-5732	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Thomas Jablonski LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Ana D. Herrera		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 8132 S Central Ave		<b>Transaction ID:</b> IE060510.0010034	
City State Zip Code Los Angeles CA 90001-3322	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer C & C Cabinets	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Veronica Nguyen		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 14774 E Orange Lake Blvd		<b>Transaction ID:</b> IE060510.0010036	
City State Zip Code Kissimmee FL 34747-8222	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Millenia Day Spa	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1242 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Rose N. Clements

Mailing Address 8306 Wilshire Blvd  
# 279

City State Zip Code  
Beverly Hills CA 90211-2304

FEC ID number of contributing federal political committee. **C**

Name of Employer Club Beverly Hills Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: IE060510.0010039

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Martin B. Buchalski

Mailing Address 105 S Derby Ave

City State Zip Code  
Ventnor City NJ 08406-2723

FEC ID number of contributing federal political committee. **C**

Name of Employer Intl. Consumer Products Inc. Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: IE060510.0010042

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joni J. Franklin

Mailing Address 727 N Waco Ave  
Ste 550

City State Zip Code  
Wichita KS 67203-3951

FEC ID number of contributing federal political committee. **C**

Name of Employer Franklin Law Office Pa Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: IE060510.0010045

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1243 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Janice Gage

Mailing Address 9442 N Capital Of Texas Hwy  
Arboretum Plaza One Ste 500

City Austin State TX Zip Code 78759-7262

FEC ID number of contributing federal political committee. **C**

Name of Employer Billings-Gage Janice CCM Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2006

Transaction ID: IE060510.0010046

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Judith A. Francis

Mailing Address 1798 Main St

City Baker City State OR Zip Code 97814-3447

FEC ID number of contributing federal political committee. **C**

Name of Employer D'ja Vu Collectables & Co-nsignments Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2006

Transaction ID: IE060510.0010052

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Zoltan Papp

Mailing Address 1135 Makawao Ave

City Makawao State HI Zip Code 96768-7403

FEC ID number of contributing federal political committee. **C**

Name of Employer Ecodool of Hawaii Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2006

Transaction ID: IE060510.0010053

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1050.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1244 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Kathleen A. Harrigan

Mailing Address 3972 Berwyn Dr

City State Zip Code  
Santa Maria CA 93455-3423

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Business Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

Transaction ID: IE060510.0010055

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Jong G. Kim

Mailing Address 1135 S Sunset Ave

City State Zip Code  
West Covina CA 91790-3937

FEC ID number of contributing federal political committee. **C**

Name of Employer Jong G. Kim MD Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

Transaction ID: IE060510.0010056

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Larry L. Schmidt

Mailing Address PO Box 552

City State Zip Code  
McCall ID 83638-0552

FEC ID number of contributing federal political committee. **C**

Name of Employer Valley Spas & More LLP Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

Transaction ID: IE060510.0010057

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1245 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jim W. Pike		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 26 E Forest Ave		<b>Transaction ID:</b> IE060510.0010058	
City Pittsburgh	State PA	Amount of Each Receipt this Period 300.00	
Zip Code 15202-1221		FEC ID number of contributing federal political committee. C	
Name of Employer Pikes Home & Building Improve LLC	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Thomas Washmon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address PO Box 5846		<b>Transaction ID:</b> IE060510.0010059	
City Austin	State TX	Amount of Each Receipt this Period 500.00	
Zip Code 78763-5846		FEC ID number of contributing federal political committee. C	
Name of Employer Washmon Law Firm, PLLC	Occupation Lawyer	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Keith Dacre		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 6065 Hillcroft St		<b>Transaction ID:</b> IE060510.0010063	
City Houston	State TX	Amount of Each Receipt this Period 250.00	
Zip Code 77081-1087		FEC ID number of contributing federal political committee. C	
Name of Employer Kemar Intl. Procurement Services LLC	Occupation Chairman	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1246 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Judy Tolbert</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 421 N Chautauqua St		<b>Transaction ID:</b> IE060510.0010065	
City State Zip Code Sedan KS 67361-1123	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Saedc Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Linda Repp</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 370 Water St		<b>Transaction ID:</b> IE060510.0010068	
City State Zip Code Shreve OH 44676-9304	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Shurtell Financial Group	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Cindi M. Gauthier</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 3901 S Webster Ave		<b>Transaction ID:</b> IE060510.0010069	
City State Zip Code Green Bay WI 54301-1040	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cingee LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1247 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jeff Venuto

Mailing Address 7835 S Rainbow Blvd  
Suite-19

City State Zip Code  
Las Vegas NV 89139-6455

FEC ID number of contributing federal political committee. **C**

Name of Employer Farmers Jeff Venuto Agency Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: IE060510.0010072

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Elizabeth Odom

Mailing Address 204 2nd Ave N

City State Zip Code  
Amory MS 38821-3411

FEC ID number of contributing federal political committee. **C**

Name of Employer Elizabeth Ann Odom Atty. Occupation Unable To Load

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: IE060510.0010073

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Albert Hill

Mailing Address 104 Kelleytown Woods Dr

City State Zip Code  
McDonough GA 30252-3936

FEC ID number of contributing federal political committee. **C**

Name of Employer Albert Hill Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Transaction ID: IE060510.0010074

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1248 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Toni Winburn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 18007 Redriver Song		<b>Transaction ID:</b> IE060510.0010077	
City State Zip Code San Antonio TX 78259-3556	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer M & T Appliance Repair	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Brian N. Peterson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 970 Eastlake Pkwy Ste 104		<b>Transaction ID:</b> IE060510.0010078	
City State Zip Code Chula Vista CA 91914-3561	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Terra Finance	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Arman Eghbali		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1634 Velleville Way		<b>Transaction ID:</b> IE060510.0010080	
City State Zip Code Sunnyvale CA 94087	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PWT IT Solutions Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1249 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Bobby L. Copeland, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 14948 Vinehill St		<b>Transaction ID: IE060510.0010088</b>	
City State Zip Code Moreno Valley CA 92553-3958	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A H I Construction	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Martha F. York</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 5076 Norriswood Dr		<b>Transaction ID: IE060510.0010091</b>	
City State Zip Code Mulberry FL 33860-9668	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Color Works Ink & Signmak- ing Supply	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Allan Ryan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 79 Long Pond Rd		<b>Transaction ID: IE060510.0010092</b>	
City State Zip Code Wading River NY 11792-2191	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1250 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William H. Fry

Mailing Address 2325 Sierra Meadows Dr

City State Zip Code  
Rocklin CA 95677-2129

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Eleventh Frame Bowling Supply Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** IE060510.0010094

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Matthew J. Speights

Mailing Address 2824 Cedar Cove Ln

City State Zip Code  
Chesapeake VA 23323-3051

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
The Advanced Security Operation Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** IE060510.0010097

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Devron L. Doyno

Mailing Address 9630 Sea Turtle Ter  
Unit 201

City State Zip Code  
Bradenton FL 34212-5274

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Doyno Realty Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

**Transaction ID:** IE060510.0010098

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1100.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1251 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Donald W. Goebel		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address PO Box 655		Transaction ID: IE060510.0010102	
City Altoona	State PA	Amount of Each Receipt this Period 200.00	
Zip Code 16603-0655		FEC ID number of contributing federal political committee. C	
Name of Employer Alto Model Train Museum Association	Occupation Owner	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Lyle Saperstein		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 2412 Vista Hogar		Transaction ID: IE060510.0010103	
City Newport Beach	State CA	Amount of Each Receipt this Period 300.00	
Zip Code 92660-4034		FEC ID number of contributing federal political committee. C	
Name of Employer Usana Health Science	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ita Ekanem		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 4106 Wallingford PI		Transaction ID: IE060510.0010104	
City Durham	State NC	Amount of Each Receipt this Period 300.00	
Zip Code 27707-5519		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1252 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Terry Massey</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2006
Mailing Address PO Box 2407		<b>Transaction ID:</b> IE060510.0010105
City Clackamas	State OR	Zip Code 97015-2407
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 300.00	
Name of Employer Terry Massey Plumbing	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Marisol Berrios</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2006
Mailing Address 18732 E 17th St		<b>Transaction ID:</b> IE060510.0010108
City Santa Ana	State CA	Zip Code 92705-2815
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00	
Name of Employer MAR. Y Sol. Sober Living	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. James B. Curley</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2006
Mailing Address 3943 Dempster St		<b>Transaction ID:</b> IE060510.0010109
City Skokie	State IL	Zip Code 60076-2263
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Associated Hearing Aids of Ill.	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1253 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Muhammad K. Imam		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 6430 Richmond Ave Ste 630		Transaction ID: IE060510.0010111
City State Zip Code Houston TX 77057-5917	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Para Dimas Acertain Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Anne E. Ryan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 5700 E Pima St Ste C		Transaction ID: IE060510.0010113
City State Zip Code Tucson AZ 85712-5637	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Nursefinders of Tucson Home Ca	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Rich Halbisch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 16601 N 40th St Suite-115		Transaction ID: IE060510.0010114
City State Zip Code Phoenix AZ 85032-3345	Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Complete Sleep Analysis Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1254 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Anna Wilson

Mailing Address 300 Grenlyn Rd

City State Zip Code  
York PA 17402-4834

FEC ID number of contributing federal political committee. **C**

Name of Employer Annas Upholstery Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

**Transaction ID:** IE060510.0010116

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Stephen H. Watkins

Mailing Address 350 W Colorado Blvd Ste 215

City State Zip Code  
Pasadena CA 91105-1855

FEC ID number of contributing federal political committee. **C**

Name of Employer Arcturus Capital Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

**Transaction ID:** IE060510.0010121

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frank Solors

Mailing Address 1390 Greenwich Dr

City State Zip Code  
Chico CA 95926-3190

FEC ID number of contributing federal political committee. **C**

Name of Employer Franks Mobile Auto Repair Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

**Transaction ID:** IE060510.0010123

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1255 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Steven Angasan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 193 Snob HI		<b>Transaction ID:</b> IE060510.0010127	
City State Zip Code Naknek AK 99633	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Kiela Resources Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Dolly L. Ghearing</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address PO Box 1540		<b>Transaction ID:</b> IE060510.0010132	
City State Zip Code Jamestown TN 38556-1540	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Jamestown Academy	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Charles R. Burkins</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 5412 Pulaski Hwy		<b>Transaction ID:</b> IE060510.0010135	
City State Zip Code Perryville MD 21903-2632	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Burkins Brothers Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1256 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Hasjonn Simmons</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address PO Box 10115		<b>Transaction ID: IE060510.0010136</b>	
City New Brunswick	State NJ	Amount of Each Receipt this Period 300.00	
Zip Code 08906-0115		Transaction ID: IE060510.0010136	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Fast Solutions Tech LLC	Occupation President	Transaction ID: IE060510.0010136	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Transaction ID: IE060510.0010136	

Full Name (Last, First, Middle Initial) <b>B. Mr. Nicholas D. Farrell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 696 Unionville Rd		<b>Transaction ID: IE060510.0010137</b>	
City Kennett Square	State PA	Amount of Each Receipt this Period 300.00	
Zip Code 19348-1763		Transaction ID: IE060510.0010137	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Sovana Bistro Inc.	Occupation Owner	Transaction ID: IE060510.0010137	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Transaction ID: IE060510.0010137	

Full Name (Last, First, Middle Initial) <b>C. Mr. Scott Broomfield</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 5930 Red Bug Lake Rd		<b>Transaction ID: IE060510.0010143</b>	
City Winter Springs	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 32708-5035		Transaction ID: IE060510.0010143	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Solutions Wireless	Occupation Owner	Transaction ID: IE060510.0010143	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Transaction ID: IE060510.0010143	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1100.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1257 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Francis Hall		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 2300 10th Ave		<b>Transaction ID:</b> IE060510.0010144	
City State Zip Code Leavenworth KS 66048-4213	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hall Associates	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Stephanie Linder		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 902 Averill Rd		<b>Transaction ID:</b> IE060510.0010147	
City State Zip Code Joppa MD 21085-3827	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Stephanie L. Linder MD LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Luis Villafania		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 234 Business Center Dr		<b>Transaction ID:</b> IE060510.0010151	
City State Zip Code Reisterstown MD 21136-1230	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Advanced Heating & Cooling LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1258 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Hugh E. Byars

Mailing Address 118 E Hospital St  
Ste 303

City State Zip Code  
Nacogdoches TX 75961-5271

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Professional Mineral & Land Title Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2006

Transaction ID: IE060510.0010153

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John H. Hamilton, Sr.

Mailing Address 16325 Westheimer Rd

City State Zip Code  
Houston TX 77082-1233

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Option #1 Realty Group Chairman

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2006

Transaction ID: IE060510.0010155

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Matthew Charbonneau

Mailing Address PO Box 1078

City State Zip Code  
Honokaa HI 96727-1078

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hamakua Framing & Structure President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2006

Transaction ID: IE060510.0010161

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1259 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ronny Baroody

Mailing Address PO Box 80788

City Charleston State SC Zip Code 29416-0788

FEC ID number of contributing federal political committee. **C**

Name of Employer Units Mobile Storage Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

Transaction ID: IE060510.0010162

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Kimberly A. Davis

Mailing Address 300 Appling Dr

City Grapevine State TX Zip Code 76051-3295

FEC ID number of contributing federal political committee. **C**

Name of Employer Freedom Martial Arts Academy Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

Transaction ID: IE060510.0010163

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jeannine D. Beane

Mailing Address 760 Piedmont Way NE

City Atlanta State GA Zip Code 30324-5100

FEC ID number of contributing federal political committee. **C**

Name of Employer Serving Atlanta Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2006

Transaction ID: IE060510.0010168

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1260 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Scott Longhurst</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 5912 Bolsa Ave Ste 202		<b>Transaction ID: IE060510.0010171</b>	
City State Zip Code Huntington Beach CA 92649-1170	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Trillium Consulting Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Don Baker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 3731 Briarpark Dr Ste 150		<b>Transaction ID: IE060510.0010174</b>	
City State Zip Code Houston TX 77042-5237	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Don Baker Communications	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Grace E. Carroll</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1641 Equestrian Dr		<b>Transaction ID: IE060510.0010175</b>	
City State Zip Code Henderson NV 89015-3416	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer JDC Investments	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1261 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Igor Spencer		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 1241 Jerome Ave		Transaction ID: IE060510.0010181	
City State Zip Code Bronx NY 10452-3323	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Magic Quick Lube. & Wash	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Lillian C. Searles		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address PO Box 9		Transaction ID: IE060510.0010190	
City State Zip Code Saint Johns MI 48879-0009	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David H. Platt		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 8661 Pebble Crest Way		Transaction ID: IE060510.0010191	
City State Zip Code West Jordan UT 84088-4878	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Platinium Engineering	Occupation Principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1262 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Steve J. Cooper		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 1013 S Girls School Rd		<b>Transaction ID:</b> IE060510.0010192	
City Indianapolis	State IN	Amount of Each Receipt this Period 500.00	
Zip Code 46231-1137			
FEC ID number of contributing federal political committee. C			
Name of Employer Security Courier Corp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Judy Kennedy		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 8909 Elder Creek Rd		<b>Transaction ID:</b> IE060510.0010193	
City Sacramento	State CA	Amount of Each Receipt this Period 300.00	
Zip Code 95828-1806			
FEC ID number of contributing federal political committee. C			
Name of Employer Redi-Gro Corp.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Seto Dersahakian		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 21324 Saticoy St		<b>Transaction ID:</b> IE060510.0010194	
City Canoga Park	State CA	Amount of Each Receipt this Period 300.00	
Zip Code 91304-5638			
FEC ID number of contributing federal political committee. C			
Name of Employer Saticoy Auto Center	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1263 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Gloria J. Bravo</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 4100 Johnson St		<b>Transaction ID: IE060510.0010195</b>	
City State Zip Code Hollywood FL 33021-5304	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Millennium Insurance & Investments	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. John T. Payne, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 17554 Barron Heights Rd		<b>Transaction ID: IE060510.0010197</b>	
City State Zip Code Dumfries VA 22025-2021	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Automated Data Technology Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Wang Thao</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 433 Featherston St		<b>Transaction ID: IE060510.0010198</b>	
City State Zip Code Waldron AR 72958-7109	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer First Oriental & Seafood	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1264 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Greg J. Russell

Mailing Address 10234 Dillon Rd

City State Zip Code  
Broomfield CO 80020-9741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Emerald Sierra Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 10 / 2006

Transaction ID: IE060510.0010199

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Tabsheer A. Shah

Mailing Address PO Box 1836

City State Zip Code  
Chino Hills CA 91709-0062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Desert Hills Holdings CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 10 / 2006

Transaction ID: IE060510.0010200

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ron Lawrence

Mailing Address 635 Circle Dr

City State Zip Code  
Iron Mountain MI 49801-1473

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Coleman Engineering Co. Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
05 / 10 / 2006

Transaction ID: IE060510.0010203

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1265 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Herb Skeens

Mailing Address 2825 N Mayfair Rd  
Ste 202

City Milwaukee State WI Zip Code 53222-4406

FEC ID number of contributing federal political committee. **C**

Name of Employer Archer O Rion LLC Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	0	6

Transaction ID: IE060510.0010205

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Martha Almond

Mailing Address 181 Lyons St

City Jackson State GA Zip Code 30233-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer Golden Key Realty Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	0	6

Transaction ID: IE060510.0010206

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Tom Grenier

Mailing Address 10764 Lower Azusa Rd

City El Monte State CA Zip Code 91731-1306

FEC ID number of contributing federal political committee. **C**

Name of Employer Aero-K Inc. Occupation General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	0	6

Transaction ID: IE060510.0010210

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1266 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Steve Gesel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1101 Kenneth Dr		<b>Transaction ID:</b> IE060510.0010215	
City State Zip Code Endicott NY 13760-1315	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Inritech, LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Roger A. Jackson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 50 Hebron Rd		<b>Transaction ID:</b> IE060510.0010217	
City State Zip Code Oxford ME 04270-2514	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jackson Sugar House and Vegetable	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. David S. Kidder		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 3928 University Blvd		<b>Transaction ID:</b> IE060510.0010219	
City State Zip Code Dallas TX 75205-1713	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1267 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Vicki Waker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 2251 Woodman Dr		<b>Transaction ID:</b> IE060510.0010220	
City State Zip Code Dayton OH 45420-1478	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cabinet Creations Design Gallery	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Maria Leonhard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 12981 Perris Blvd		<b>Transaction ID:</b> IE060510.0010222	
City State Zip Code Moreno Valley CA 92553-4102	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Leonhard Maria Insurance	Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Manuel Gutierrez</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 2210 E Harmony Ave		<b>Transaction ID:</b> IE060511.0010001	
City State Zip Code Mesa AZ 85204-6136	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer M & H Trucking & Grading	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	675.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1268 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Sridevi Madiraju		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 2024 Opitz Blvd Ste A		<b>Transaction ID:</b> IE060511.0010003	
City Woodbridge	State VA	Amount of Each Receipt this Period 700.00	
Zip Code 22191-3388		Transaction ID: IE060511.0010003	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00	
Name of Employer Century Pediatrics, Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Jeanna Adamo		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 1300 Terminal Dr		<b>Transaction ID:</b> IE060511.0010006	
City Carlsbad	State NM	Amount of Each Receipt this Period 350.00	
Zip Code 88220-9470		Transaction ID: IE060511.0010006	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00	
Name of Employer Celtech Corp.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Lois McGlothlin		Date of Receipt M M / D D / Y Y Y Y Y 05 / 11 / 2006	
Mailing Address 616 E Main St		<b>Transaction ID:</b> IE060511.0010011	
City Lebanon	State VA	Amount of Each Receipt this Period 350.00	
Zip Code 24266-4800		Transaction ID: IE060511.0010011	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00	
Name of Employer Life Recovery LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1269 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Diana M. Campbell		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1592 E Main St		Transaction ID: IE060511.0010012	
City Freeland	State WA	Zip Code 98249	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer L D Highlander LLC John L Scott Swi	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Marty C. Collums		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 14100 SW 101st Ln		Transaction ID: IE060511.0010014	
City Dunnellon	State FL	Zip Code 34432-4700	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Marty Collums Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Rudolph Valadez		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 12582 Navel Ct		Transaction ID: IE060511.0010018	
City Riverside	State CA	Zip Code 92503-7056	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Valadez Associates International Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1271 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David F. Birmingham		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 2115 Greenwich Cir E		<b>Transaction ID:</b> IE060511.0010027	
City State Zip Code Colorado Springs CO 80909-1625	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1526.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Johnny W. Preston, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 399 Goldmine Rd		<b>Transaction ID:</b> IE060511.0010028	
City State Zip Code Glade Hill VA 24092-3542	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A H Preston & Sons Plumbing	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Leo Maranan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address PO Box 261308		<b>Transaction ID:</b> IE060511.0010030	
City State Zip Code Encino CA 91426-1308	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer American Health Care Services	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1272 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Anthony Jones		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 405 E 106th St		<b>Transaction ID:</b> IE060511.0010037	
City Indianapolis	State IN	Zip Code 46280-1325	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer M D & S Industrail Supply Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Kenna Garner		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 1314 Texas St Ste 710		<b>Transaction ID:</b> IE060511.0010038	
City Houston	State TX	Zip Code 77002-3522	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Garner & Arhic LLP	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael P. Gokhale		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 4199 Campus Dr Ste 720		<b>Transaction ID:</b> IE060511.0010039	
City Irvine	State CA	Zip Code 92612-4698	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sextant Engineeingtechno- logiesinc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1273 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Sammy Saad		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 25003 Michigan Ave Ste 10 Ste 10		<b>Transaction ID:</b> IE060511.0010043
City Dearborn State MI Zip Code 48124-1747	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Samco Sales & Service Inc. Occupation President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Daniel C. Gillespie		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 18 Pepper Bush Cir Apt 222		<b>Transaction ID:</b> IE060511.0010044
City Savannah State GA Zip Code 31411-3009	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 751.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Graham Sheppard		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 25 N Orange Ave		<b>Transaction ID:</b> IE060511.0010045
City Green Cove Springs State FL Zip Code 32043-3401	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Vodatec Inc. Occupation President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1274 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Tammy M. Griner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 406 N Hill St		<b>Transaction ID:</b> IE060511.0010047
City State Zip Code Griffin GA 30223-2568	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Tammy M. Griner Atty. at Law PC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Carl Besse		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 82 Emerald Rd		<b>Transaction ID:</b> IE060511.0010048
City State Zip Code Rutland MA 01543-1535	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Rutland Nurseries	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Eli J. Haig		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 330 W Armory Dr		<b>Transaction ID:</b> IE060511.0010053
City State Zip Code South Holland IL 60473-2820	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Industrial Plastic Recycl. Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1275 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Alexander J. Foglietta		Date of Receipt MM / DD / YYYY 05 / 11 / 2006
Mailing Address 2 Hospital Ave		<b>Transaction ID:</b> IE060511.0010055
City State Zip Code Danbury CT 06810-5950	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Foglietta & Son Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Melinda J. Bush		Date of Receipt MM / DD / YYYY 05 / 11 / 2006
Mailing Address 31 Whispering Oaks Cir Ste 1005N		<b>Transaction ID:</b> IE060511.0010057
City State Zip Code West Palm Beach FL 33411-4655	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 700.00
Name of Employer Hospitality Resources World Wide	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ephram J. Aguirre		Date of Receipt MM / DD / YYYY 05 / 11 / 2006
Mailing Address 144 E Durian Ave		<b>Transaction ID:</b> IE060511.0010062
City State Zip Code Coalinga CA 93210-2828	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Consulting & Investigative Services	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1276 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Diane Lee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 99 S Chester Ave		<b>Transaction ID:</b> IE060511.0010063
City State Zip Code Pasadena CA 91106-3104	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Realty Executives	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Bonnie J. Elseroad		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 4655 Webb Bridge Rd		<b>Transaction ID:</b> IE060511.0010067
City State Zip Code Alpharetta GA 30005-4447	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Open Arms Luthran Child Development Ce	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ary A. Nudell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 Reisterstown Rd Ste 110		<b>Transaction ID:</b> IE060511.0010069
City State Zip Code Baltimore MD 21208-5339	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Global Link Communications LLC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1277 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Leslie L. Wathen</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 575 E Locust Ave Ste 201		<b>Transaction ID:</b> IE060511.0010070	
City State Zip Code Fresno CA 93720-2928	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer S. G. Wathen Family Builders	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Wayne Davis</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1026 E Main St		<b>Transaction ID:</b> IE060511.0010073	
City State Zip Code Spindale NC 28160-2320	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Carolina Cafe	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert E. Anderson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 13700 83rd Way N Ste 204		<b>Transaction ID:</b> IE060511.0010074	
City State Zip Code Osseo MN 55369-7015	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Robert E Anderson	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1278 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert P. Dykes, Jr.

Mailing Address 11323 Phillips Parkway Dr E

City State Zip Code  
Jacksonville FL 32256-2755

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Robert Dykes Hm. Improvement

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: IE060511.0010075

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Gotsis

Mailing Address 500 Northwest Plz Ste 516

City State Zip Code  
Saint Ann MO 63074-2220

FEC ID number of contributing federal political committee. **C**

Name of Employer  
T M Gotsis DDS PC

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: IE060511.0010077

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rosemarie Adam

Mailing Address 2903 Chelsea Wood Dr

City State Zip Code  
Valrico FL 33594-5204

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Gothard Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: IE060511.0010078

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1279 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John F. Hergert

Mailing Address 4037 Highway 91

City State Zip Code  
Leadville CO 80461-9214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
White Mountain Tours President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: IE060511.0010081

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Paul W. Abbott

Mailing Address 201 W Airport Rd

City State Zip Code  
Okmulgee OK 74447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Covington Aircraft Engines Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: IE060511.0010083

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Justin Hickey

Mailing Address 12798 Spinnaker Ln

City State Zip Code  
Wellington FL 33414-4987

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
J H Hauling Service Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: IE060511.0010085

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1280 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Patrick G. McGrew

Mailing Address 6356 S Tempe Ct

City Aurora State CO Zip Code 80016-7006

FEC ID number of contributing federal political committee. **C**

Name of Employer HSD Consulting Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 11 / 2006

Transaction ID: IE060511.0010088

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Nina Carpenter

Mailing Address 1930 S Alma School Rd C103

City Mesa State AZ Zip Code 85210-3064

FEC ID number of contributing federal political committee. **C**

Name of Employer Gem Mortgage Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 11 / 2006

Transaction ID: IE060511.0010089

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Bill Dawson

Mailing Address 100 Nicholas Long Dr

City Columbia State TN Zip Code 38401-4369

FEC ID number of contributing federal political committee. **C**

Name of Employer Glass Doctor Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 11 / 2006

Transaction ID: IE060511.0010099

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1281 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Doris J. Hendricks

Mailing Address 2 N Maple Ave

City State Zip Code  
Marlton NJ 08053-3008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Title Consultants LLC Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: IE060511.0010102

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert F. Padilla, Jr.

Mailing Address 22 Jason Ln

City State Zip Code  
Stafford VA 22554-5125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PAC. Solutions CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: IE060511.0010103

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Fredericks

Mailing Address 2901 Walnut St

City State Zip Code  
Denver CO 80205-2344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Saddleback Design Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2006

Transaction ID: IE060511.0010105

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1282 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gary Langley

Mailing Address 4103 Gallo Cir

City State Zip Code  
Austin TX 78734-1626

FEC ID number of contributing federal political committee. **C**

Name of Employer Luminaria Global Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: IE060511.0010107

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Emilio Vazquez

Mailing Address 522 Beach Ave

City State Zip Code  
Bronx NY 10473-3612

FEC ID number of contributing federal political committee. **C**

Name of Employer Vaz Medical & Individual Safety, Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: IE060511.0010111

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Denise Lacovey

Mailing Address 1430 Progress Way

City State Zip Code  
Eldersburg MD 21784-6429

FEC ID number of contributing federal political committee. **C**

Name of Employer D & B Whlse. Doors LLC Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2006

Transaction ID: IE060511.0010113

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1283 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Miss Smita J. Patel		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006
Mailing Address 1002 S Naco Hwy America's Best Value Inn & Sui		Transaction ID: IE060511.0010115
City Bisbee State AZ Zip Code 85603-9621	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer San Jose Lodge Inc. Occupation President	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles McClure		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006
Mailing Address 1120 Thomasville Rd		Transaction ID: IE060511.0010116
City Tallahassee State FL Zip Code 32303-6224	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer McClure & Wazewski Pa Occupation Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard C. Newman		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006
Mailing Address 1 SW Columbia St		Transaction ID: IE060511.0010119
City Portland State OR Zip Code 97258-2002	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Plywood Tropics Occupation Chairman	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1284 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Cannone

Mailing Address 28202 Cabot Rd  
Suite-300

City Laguna Niguel State CA Zip Code 92677-1222

FEC ID number of contributing federal political committee. **C**

Name of Employer Intl. Equity Holdings Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: IE060511.0010120

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sharon P. Creekmore

Mailing Address 5716 Southern Blvd

City Virginia Beach State VA Zip Code 23462-2409

FEC ID number of contributing federal political committee. **C**

Name of Employer Gyro Systems Co. Inc. Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: IE060511.0010123

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Curt R. Jung

Mailing Address 2727 Werlein Ave

City Houston State TX Zip Code 77005-3959

FEC ID number of contributing federal political committee. **C**

Name of Employer Jung Motorsports Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: IE060511.0010125

Amount of Each Receipt this Period  
400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1285 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Philip T. Dunlop</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 231 Ruby Ave Ste C		<b>Transaction ID: IE060511.0010126</b>	
City State Zip Code Kissimmee FL 34741-5640	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Philip Dunlap Law Office	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ken Sisk</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 2337 Mount Pleasant Rd		<b>Transaction ID: IE060511.0010128</b>	
City State Zip Code Chesapeake VA 23322-1210	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sisk & Battles LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert Lange</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 1402 Atlantic Ave		<b>Transaction ID: IE060511.0010130</b>	
City State Zip Code Benson MN 56215-1126	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lange Associates Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1286 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Roy C. Armstrong		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 27 Windsor Ct		<b>Transaction ID:</b> IE060511.0010132	
City State Zip Code Napa CA 94558-3542	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Chardonnay Realty	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Belinda Taylor		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 938 S Church St Ste C		<b>Transaction ID:</b> IE060511.0010133	
City State Zip Code Smithfield VA 23430-1734	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hometown Community Cu	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John Q. Rodgers		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 2601 Pacific Coast Hwy Ste 201		<b>Transaction ID:</b> IE060511.0010135	
City State Zip Code Hermosa Beach CA 90254-2277	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Tax Attny.-cpa		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1287 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert Goforth

Mailing Address 115 N Ervin St

City State Zip Code  
Darlington SC 29532-2817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Filing Solutions LLC Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: IE060511.0010137

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas F. Villasana

Mailing Address 5761 E Christine Ave

City State Zip Code  
Fresno CA 93727-6149

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
A-Plus Concrete Construct- ion Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: IE060511.0010140

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Zygmund Turski

Mailing Address 6669 NW 25th Way

City State Zip Code  
Boca Raton FL 33496-2021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Synergetix CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

Transaction ID: IE060511.0010141

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1288 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Glen Robertson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 2602 N Stadium Blvd		<b>Transaction ID:</b> IE060511.0010142	
City State Zip Code Columbia MO 65202-1271	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Emery Sapp & Sons Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Anthony J. Abatecola		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 124 Broad St Fl 2		<b>Transaction ID:</b> IE060511.0010144	
City State Zip Code Pawtucket RI 02860-2052	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Abatecola's USA Karate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jaime Perez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 606 S Hill St Suite-705		<b>Transaction ID:</b> IE060511.0010146	
City State Zip Code Los Angeles CA 90014-1720	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Proquest Solutions	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1289 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Thomas W. Hughes		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 40 Springhouse Dr		<b>Transaction ID:</b> IE060511.0010147	
City State Zip Code Springboro OH 45066-9445	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Halden Enterprises LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Raymond Coniglio		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 705 Sebastian Blvd Ste A		<b>Transaction ID:</b> IE060511.0010149	
City State Zip Code Sebastian FL 32958-4397	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Global Renewable Energy LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Garry L. Morris		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 9343 North Loop E Ste 650		<b>Transaction ID:</b> IE060511.0010150	
City State Zip Code Houston TX 77029-1248	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Garry Morris Transport	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1290 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Natalie R. Hurlburt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 13893 Highway 98		<b>Transaction ID:</b> IE060511.0010153	
City State Zip Code Meadville PA 16335-8796	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hurlburt Appraisal Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Katrina Wood		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 667 County Route 403		<b>Transaction ID:</b> IE060511.0010154	
City State Zip Code Greenville NY 12083-1703	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Graywood Stables	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Irma E. Simpson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 93 Blue Hill Ave Ste 2		<b>Transaction ID:</b> IE060511.0010163	
City State Zip Code Milton MA 02186-1105	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Calcina Intl. LLC	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1291 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Arthur Stanley		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1574 Placid Ct		<b>Transaction ID:</b> IE060511.0010164	
City State Zip Code Simi Valley CA 93065-5747	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Optical Physics Co.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Patrick J. Dillon		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 2195 Faraday Ave Ste A		<b>Transaction ID:</b> IE060511.0010167	
City State Zip Code Carlsbad CA 92008-7207	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Artisoptimus Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael R. Bordelon		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 11406 N Crestview Dr		<b>Transaction ID:</b> IE060511.0010172	
City State Zip Code Fountain Hills AZ 85268-6100	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dark Horse Solutions LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1292 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ahron Farache

Mailing Address 1999 NE 150th St Ste 104

City State Zip Code  
North Miami FL 33181-1118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
A F Recycling & Waste Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

**Transaction ID:** IE060511.0010175

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Christopher L. Diana

Mailing Address 12228 N Cave Creek Rd  
Ste 110

City State Zip Code  
Phoenix AZ 85022-6519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
S C Del Sol. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

**Transaction ID:** IE060511.0010176

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Meada Pakour

Mailing Address 14608 Victory Blvd

City State Zip Code  
Van Nuys CA 91411-1621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Meada Pakour MD Inc. Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 6

**Transaction ID:** IE060511.0010177

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1293 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Gary B. Rosenfeld</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 12471 SW 130th St # B9		<b>Transaction ID: IE060511.0010178</b>	
City State Zip Code Miami FL 33186-6236	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Taxing Solutions	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Leslie H. Fenton</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1313 Crane Cres		<b>Transaction ID: IE060511.0010181</b>	
City State Zip Code Virginia Beach VA 23454-5662	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pal Systems Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Nancy D. Kinder</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1201 Race St Ste 109		<b>Transaction ID: IE060511.0010182</b>	
City State Zip Code New Castle IN 47362-4653	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Eastern Indiana Dev. Dst. Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1294 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Carol A. Reithmiller		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 13430 Cassington Ct		<b>Transaction ID:</b> IE060511.0010184	
City State Zip Code Charlotte NC 28273-6707	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Carol A. Reithmiller, CPA	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Don L. Muller, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 475 Metroplex Dr Ste 206		<b>Transaction ID:</b> IE060511.0010186	
City State Zip Code Nashville TN 37211-3141	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer G & D Whlse. Food Services	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mamoun Najib		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 5613 Leesburg Pike Ste 5		<b>Transaction ID:</b> IE060511.0010187	
City State Zip Code Falls Church VA 22041-2912	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer New York Life	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1295 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Gary Dimitroff</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 4015 Avenida De La Plata Ste 401		<b>Transaction ID: IE060511.0010188</b>	
City State Zip Code Oceanside CA 92056-5848	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wisdomking.com Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. David Waters</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 4600 S Syracuse St Fl 9		<b>Transaction ID: IE060511.0010189</b>	
City State Zip Code Denver CO 80237-2750	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Arcanum Group Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Bobbie W. Powers</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 4549 Wood River Dr		<b>Transaction ID: IE060511.0010190</b>	
City State Zip Code Fairbanks AK 99709-3404	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1478.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1296 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Andrew B. Mazzone</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 68 Lamar St Unit A		Transaction ID: IE060511.0010191	
City State Zip Code West Babylon NY 11704-1316	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Thermatic Intl.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Darlene M. Horine</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 908 Belvedere Dr		Transaction ID: IE060511.0010192	
City State Zip Code Kokomo IN 46901-8609	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Galaxy Spas & Pools	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Jason C. Rivera</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 3578 Hartsel Dr Ste 352		Transaction ID: IE060511.0010195	
City State Zip Code Colorado Springs CO 80920-2103	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer J C & Associates Mktg. Group	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1297 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Byron K. Campisi		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 1996 Route 9W		<b>Transaction ID:</b> IE060511.0010196	
City State Zip Code Lake Katrine NY 12449-5423	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hudson Valley Hearing	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Antoine E. Elhosri		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 939 Social St		<b>Transaction ID:</b> IE060511.0010197	
City State Zip Code Woonsocket RI 02895-1340	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Tonys Wholesaler	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mack C. Jay		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 2010 New Garden Rd Ste C		<b>Transaction ID:</b> IE060511.0010198	
City State Zip Code Greensboro NC 27410-2528	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Benchmark Life Strategies	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1298 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Maya Fuchs		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 193 Route 9		<b>Transaction ID:</b> IE060511.0010200	
City Englishtown	State NJ	Amount of Each Receipt this Period 700.00	
Zip Code 07726-3015		FEC ID number of contributing federal political committee. C	
Name of Employer Family Dental Inc.	Occupation Dentist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jack A. Morse		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 25 Homestead Rd N Ste 11		<b>Transaction ID:</b> IE060511.0010200	
City Lehigh Acres	State FL	Amount of Each Receipt this Period 300.00	
Zip Code 33936-6600		FEC ID number of contributing federal political committee. C	
Name of Employer Lehigh Showcase Properties	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Steve Rosse		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 7005 Avenue N		<b>Transaction ID:</b> IE060511.0010200	
City Kearney	State NE	Amount of Each Receipt this Period 300.00	
Zip Code 68847-6089		FEC ID number of contributing federal political committee. C	
Name of Employer Buffalo Ridge Golf Course	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1299 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Teddy Barzilai</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4241 Jutland Dr Ste 304A		<b>Transaction ID:</b> IE060512.0010005	
City State Zip Code San Diego CA 92117-3654	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Teddy Barzilai CPA Inc. Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Karen Beatty</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 813 Woodland West Dr		<b>Transaction ID:</b> IE060512.0010013	
City State Zip Code Waco TX 76712-3415	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Curves Waco Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Thomas G. Forte</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 106 E State St		<b>Transaction ID:</b> IE060512.0010014	
City State Zip Code Doylestown PA 18901-4354	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Thomas G Forte DDS PC Doctor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1300 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jocelyn A. MacKay		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 703 Wonder View Dr		<b>Transaction ID:</b> IE060512.0010015	
City State Zip Code Calabasas CA 91302-2246	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Icap Devcorp	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ludwig Parsamian		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4611 Alta Canyon Rd		<b>Transaction ID:</b> IE060512.0010016	
City State Zip Code La Canada Flintrid CA 91011-2033	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ludwig Parsamian	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James M. Plaster		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 351 Coffman St St 200		<b>Transaction ID:</b> IE060512.0010017	
City State Zip Code Longmont CO 80501-5453	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer James Plaster Realtor	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1301 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Alexander Giannone</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2711 S Ocean Dr		<b>Transaction ID:</b> IE060512.0010019	
City Hollywood	State FL	Amount of Each Receipt this Period 350.00	
Zip Code 33019-2704		FEC ID number of contributing federal political committee. C	
Name of Employer Trump Hollywood	Occupation Manager	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Joshua B. Greer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 36 Filter Plant Rd		<b>Transaction ID:</b> IE060512.0010021	
City East Bernstadt	State KY	Amount of Each Receipt this Period 500.00	
Zip Code 40729-6603		FEC ID number of contributing federal political committee. C	
Name of Employer The Mihi Group LLC	Occupation Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. John Probandt</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 7 Upper Newport Plz		<b>Transaction ID:</b> IE060512.0010023	
City Newport Beach	State CA	Amount of Each Receipt this Period 500.00	
Zip Code 92660-2630		FEC ID number of contributing federal political committee. C	
Name of Employer Rising Star Holdings LLC	Occupation CEO	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1302 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Alicia Trevino

Mailing Address 2040 N Belt Line Rd

City State Zip Code  
Mesquite TX 75150-5801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alicia Trevino Realtors CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

**Transaction ID:** IE060512.0010025

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kenny A. Kirby

Mailing Address 602 Madison St SE

City State Zip Code  
Huntsville AL 35801-4401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Timbers Edge Properties LLC President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

**Transaction ID:** IE060512.0010028

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. David M. Bahou

Mailing Address 22902 Los Alisos Blvd Ste D

City State Zip Code  
Mission Viejo CA 92691-2853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alisos Animal Hospital President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

**Transaction ID:** IE060512.0010029

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1303 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Susan M. Rowell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1137 Canal St		<b>Transaction ID:</b> IE060512.0010030
City State Zip Code Ruskin FL 33570-2802	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Celtic Framing Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Robert E. Lee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 508A Baldwin Dr		<b>Transaction ID:</b> IE060512.0010031
City State Zip Code Albany GA 31707-3906	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer My Brothers Keeper Community Developem	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Herman Franck		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1801 7th St # 150		<b>Transaction ID:</b> IE060512.0010032
City State Zip Code Sacramento CA 95814-7005	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Herman Franckattorney at Law	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1304 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dean M. Klassy

Mailing Address PO Box 986

City State Zip Code  
Elkhorn WI 53121-0986

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Aviation Small Bus. Consortium CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010035

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Haroldo Silva

Mailing Address 16830 Collins Ave

City State Zip Code  
Sunny Isles Beach FL 33160-4203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Master Intl. Realty President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010036

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Vilma C. Bonilla

Mailing Address 226 N Genesee St

City State Zip Code  
Waukegan IL 60085-4262

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Vm Intl. Auto Insurance Agency Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010039

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1305 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Leonard Brussock		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 6360 S Kendall St		Transaction ID: IE060512.0010040	
City Littleton	State CO	Zip Code 80123-3875	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Arborist Arms Tree Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John Knapp		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 8012 N Armenia Ave		Transaction ID: IE060512.0010041	
City Tampa	State FL	Zip Code 33604-2726	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Golden Angels Learning Ce- nter	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William W. Walker, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 1127 Lowell Rd		Transaction ID: IE060512.0010042	
City Concord	State MA	Zip Code 01742-5522	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer William W Walker Jr	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1306 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Manuel Sykes</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2901 54th Ave S		<b>Transaction ID:</b> IE060512.0010043	
City State Zip Code Saint Petersburg FL 33712-4611	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bethel Community Foundati-on	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Thomas Linz</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1308 US Highway 50		<b>Transaction ID:</b> IE060512.0010044	
City State Zip Code Milford OH 45150-9782	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Tripacksleever	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Virginia L. Brendle</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 600 E 10th St		<b>Transaction ID:</b> IE060512.0010047	
City State Zip Code Shawnee OK 74801-7102	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Virginia's Home Furnishin-gs	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1307 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Colleen Kelsey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 2302		<b>Transaction ID:</b> IE060512.0010048	
City Clackamas	State OR	Amount of Each Receipt this Period 300.00	
Zip Code 97015-2302		Transaction ID: IE060512.0010048	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Alphatek Specialty Pdts. Inc.	Occupation President	Amount of Each Receipt this Period 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 300.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Jerald M. Ellis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 309 1315 N 12th St		<b>Transaction ID:</b> IE060512.0010049	
City Frederick	State OK	Amount of Each Receipt this Period 500.00	
Zip Code 73542-2015		Transaction ID: IE060512.0010049	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Jerald M Ellis CPA PC	Occupation CEO	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period 500.00	

Full Name (Last, First, Middle Initial) <b>C. Dr. Kristi Cobb</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 547 N Mustang Rd		<b>Transaction ID:</b> IE060512.0010052	
City Mustang	State OK	Amount of Each Receipt this Period 250.00	
Zip Code 73064-7002		Transaction ID: IE060512.0010052	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Cobb Kristi DDS Inc. PC	Occupation Doctor	Amount of Each Receipt this Period 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1050.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1308 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Sal Dirusso

Mailing Address 437 Broad St

City State Zip Code  
Shrewsbury NJ 07702-4001

FEC ID number of contributing federal political committee. **C**

Name of Employer Allstate Insurance      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010055

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Pam Ullstrom

Mailing Address 223 W Madison St

City State Zip Code  
Ottawa IL 61350-2818

FEC ID number of contributing federal political committee. **C**

Name of Employer Ullstrom Pam Land Searcher      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010056

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Deborah A. Case

Mailing Address 205 Pecan Blvd

City State Zip Code  
McAllen TX 78501-2354

FEC ID number of contributing federal political committee. **C**

Name of Employer Deborah Casedance Academy      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010058

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1309 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. G. Coffin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 263 Market Sq		<b>Transaction ID:</b> IE060512.0010060	
City State Zip Code Lake Forest IL 60045-1815	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Digital Acoustics LLC	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Adam C. Mattocks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2824 Deerfield Dr		<b>Transaction ID:</b> IE060512.0010062	
City State Zip Code Ellicott City MD 21043-3418	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Safety Plus LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Brenda Roche		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1527 14th St W		<b>Transaction ID:</b> IE060512.0010063	
City State Zip Code Billings MT 59102-3105	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Arrowhead Psychiatric & Behavioral Sci	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1310 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Gregg N. Riley

Mailing Address 3726 Harvey Penick Dr

City State Zip Code  
 Round Rock TX 78664-3951

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Riley Performance Group Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010064

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Kayode Akintayo

Mailing Address 10101 Southwest Fwy

City State Zip Code  
 Houston TX 77074-1126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Cradle Solution Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010065

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
 Ms. Janice Y. Holley

Mailing Address PO Box 728

City State Zip Code  
 Cottondale FL 32431-0728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 J & R Holley Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010067

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1311 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Dorothy Roberts

Mailing Address 2646 Alliston Ct

City Columbus State OH Zip Code 43220-4214

FEC ID number of contributing federal political committee. **C**

Name of Employer Roberts Associates Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 12 / 2006

Transaction ID: IE060512.0010068

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Johnny Rosso

Mailing Address 301 SW 5th St

City Stigler State OK Zip Code 74462-2305

FEC ID number of contributing federal political committee. **C**

Name of Employer Stigler Livestock Auction Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 12 / 2006

Transaction ID: IE060512.0010068

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Dee Shirk

Mailing Address 206 N Wright St

City Siloam Springs State AR Zip Code 72761-2668

FEC ID number of contributing federal political committee. **C**

Name of Employer Champion Mechanical Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 12 / 2006

Transaction ID: IE060512.0010072

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1312 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Charles Van Cleave		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2150 First Commercial Dr S		<b>Transaction ID:</b> IE060512.0010073
City State Zip Code Southaven MS 38671-2011	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Transport Services Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Sharon M. Bourgeois		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 430 W 34th St Apt LE		<b>Transaction ID:</b> IE060512.0010074
City State Zip Code New York NY 10001-2309	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Applied Psychological Services	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert J. Dronberger		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 3465 American River Dr Ste C		<b>Transaction ID:</b> IE060512.0010075
City State Zip Code Sacramento CA 95864-5747	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Robert J Dronberger Developments	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1313 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Susie Parker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 9180 E Indian Bend Rd Ste F2		<b>Transaction ID:</b> IE060512.0010076	
City State Zip Code Scottsdale AZ 85250-8510	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Sew From The Heart Owner	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Michael Dillhyon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 400 S Woods Mill Dr Ste 105		<b>Transaction ID:</b> IE060512.0010077	
City State Zip Code Saint Louis MO 63107	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Netelligent Corp. President	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Guy A. Drew		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 17223 Tarkio Way		<b>Transaction ID:</b> IE060512.0010080	
City State Zip Code San Antonio TX 78247-5844	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Graphical Acquisition Development Owner	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1314 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William G. Shahin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2404 S Broadway		Transaction ID: IE060512.0010082
City State Zip Code Santa Maria CA 93454-7818	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Broadway Mobil	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Dan R. Holdren		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 23929 E Cliff Dr		Transaction ID: IE060512.0010086
City State Zip Code Santa Cruz CA 95062-5250	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Dan R Holdren	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Joanne M. Lane		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2465 Stirling Rd		Transaction ID: IE060512.0010087
City State Zip Code Fort Lauderdale FL 33312-6520	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Imagination Station Day Care	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1315 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Roger A. Schwager		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address PO Box H 2111 Forest Ave		<b>Transaction ID:</b> IE060512.0010088
City State Zip Code Great Bend KS 67530-4018	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Mid America Property Mgmt. Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard E. Squires		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 101 Reid Ave Ste 106		<b>Transaction ID:</b> IE060512.0010089
City State Zip Code Port Saint Joe FL 32456-1821	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Sand Castle Developers LLC President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Ida Sponholtz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 405 Broadway St		<b>Transaction ID:</b> IE060512.0010090
City State Zip Code Penrose CO 81240-9040	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Senior Nutrition & Community Center President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1316 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
F. M. Anderson

Mailing Address 106 Puuhale Rd  
Ste E

City Honolulu State HI Zip Code 96819-2280

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Rim Partners LLC Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010092

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Greg Deese

Mailing Address 5310 Bellaire Blvd

City Bellaire State TX Zip Code 77401-3904

FEC ID number of contributing federal political committee. **C**

Name of Employer Honey-Do Handyman LLC Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010093

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Marilyn J. Dusi

Mailing Address 810 Lupine Ln

City Templeton State CA Zip Code 93465-8569

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010094

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1317 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Michele A. Howell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4855 State St Ste 2		<b>Transaction ID:</b> IE060512.0010095	
City State Zip Code Saginaw MI 48603-3891	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Advanced Anesthesia Associates PLLC	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Michelle Wilson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 721 N Michigan Ave		<b>Transaction ID:</b> IE060512.0010102	
City State Zip Code Howell MI 48843-1511	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pure & Simple Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Frank Firth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 416 E 10th St		<b>Transaction ID:</b> IE060512.0010103	
City State Zip Code Newport KY 41071-2220	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N K Stone Design	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1318 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steve L. Caughran

Mailing Address 195 W Shaw Ave  
Ste 102

City State Zip Code  
Clovis CA 93612-3700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alpha Graphics Owner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010104

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Timothy C. Russell

Mailing Address 1635 Market St  
Ste 410

City State Zip Code  
Philadelphia PA 19103-2205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Spector Gadon and Rosen Partner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010105

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stephen Perrone

Mailing Address 4325 Woodland Park Dr Ste 105

City State Zip Code  
Melbourne FL 32904-2099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Brickell Bay Capital Group President

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010106

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1319 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ralph Reeve

Mailing Address 3592 Gerkin Rd

City State Zip Code  
Bishop CA 93514-7076

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ralph Reeve Pump & Well Service Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010109

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Donnis L. Livingston

Mailing Address 2439 Heritage Vlg

City State Zip Code  
Snellville GA 30078-2699

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Partners In Staffing Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010113

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Jack C. Fisher

Mailing Address 1950 US Highway 51 Byp N

City State Zip Code  
Dyersburg TN 38024-1896

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jack C. Fisher Orthodontist Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010114

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1320 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Peter Kurtz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 245 Main St Ste 120		Transaction ID: IE060512.0010115
City State Zip Code White Plains NY 10601-2425	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Diane M. Buatte		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 550 S Brentwood Blvd Apt 3A		Transaction ID: IE060512.0010116
City State Zip Code Saint Louis MO 63105-2568	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Financial Ledger Inc Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Joan Donahoe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1704 E Edgewood Pl		Transaction ID: IE060512.0010117
City State Zip Code Sioux Falls SD 57103-4568	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1321 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Manuel Lopez</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 1186 W Sunset Blvd		<b>Transaction ID:</b> IE060512.0010118	
City State Zip Code Los Angeles CA 90012-1243	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Manuel Lopez Law Offices Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. John P. Hart</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 3091 W Galbraith Rd		<b>Transaction ID:</b> IE060512.0010122	
City State Zip Code Cincinnati OH 45239-4285	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation SelectionMgmt CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Charles D. Schmulbach</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 104 S Lark Ln		<b>Transaction ID:</b> IE060512.0010124	
City State Zip Code Carbondale IL 62901-2021	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2501.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1322 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Harlan L. Brown		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 100662 County Road 16		<b>Transaction ID:</b> IE060512.0010126	
City Mitchell	State NE	Zip Code 69357-2136	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Edward N. Spencer		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 370 N 200 E		<b>Transaction ID:</b> IE060512.0010129	
City Ivins	State UT	Zip Code 84738-6104	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Sue Barton		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address PO Box 865 1750 Laurel St		<b>Transaction ID:</b> IE060512.0010130	
City Westcliffe	State CO	Zip Code 81252-0865	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hair Friends Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1323 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Barbara Monroe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 5742 E Paseo Dulce		<b>Transaction ID:</b> IE060512.0010131	
City State Zip Code Cave Creek AZ 85331-8558	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Carmel Custom Design Builders	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Kathleen Brent		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1632 Highway 95		<b>Transaction ID:</b> IE060512.0010132	
City State Zip Code Bullhead City AZ 86442-7906	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Reality World-All In One Realty	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Sandra A. Collins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1880 US Highway 72 E		<b>Transaction ID:</b> IE060512.0010133	
City State Zip Code Athens AL 35611-4416	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Serendipity Antiques & Interiors	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1324 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Renae Sylvester

Mailing Address 230 E Main St

City State Zip Code  
Fairborn OH 45324-4706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fotini's Hair Designs Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: IE060512.0010135

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Scott Vandenbranden

Mailing Address 3620 Reese Ave

City State Zip Code  
West Palm Beach FL 33404-3456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Keystone By Máax Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: IE060512.0010137

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gordon Pink

Mailing Address 747 N Dupont Hwy

City State Zip Code  
Dover DE 19901-3938

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Berry Van Lines Inc. Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: IE060512.0010138

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1325 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Ronald T. Makela

Mailing Address PO Box 333

City State Zip Code  
 Ipswich SD 57451-0333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Norse Strategies & Enterprises LLC President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010141

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Mickey E. Johnson

Mailing Address 301 N Main St

City State Zip Code  
 Winston Salem NC 27101-3836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Computing Solutions Group Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010148

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
 Ms. Lesha R. Breeding

Mailing Address Greensburg Road

City State Zip Code  
 Columbia KY 42728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Rogers Trucking Inc. Partner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

**Transaction ID:** IE060512.0010150

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1326 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William J. Powers		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 3703 N Main St Ste 208		<b>Transaction ID:</b> IE060512.0010157	
City State Zip Code Rockford IL 61103-1678	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Zimtek Account Manage.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David W. Fritsch		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 2810 Deerhaven Dr		<b>Transaction ID:</b> IE060512.0010158	
City State Zip Code Cincinnati OH 45244-2819	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Fritsch Power & Processing Services	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William Zebrowski		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2006	
Mailing Address 11298 Muller Rd		<b>Transaction ID:</b> IE060512.0010159	
City State Zip Code Fort Pierce FL 34945-2321	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer American Quality Roofing	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1327 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Sam S. Bangalore

Mailing Address 1170 Green St

City State Zip Code  
Iselin NJ 08830-2012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dosa Express President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010160

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ronald Jeffress

Mailing Address PO Box 3919

City State Zip Code  
Gillette WY 82717-3919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ABM Holding Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010162

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Rick G. Jolliff

Mailing Address PO Box 21359

City State Zip Code  
Bakersfield CA 93390-1359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jolliff Enterprises Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2006

Transaction ID: IE060512.0010164

Amount of Each Receipt this Period  
600.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1328 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Charles Reliford		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 18046 Villa Creek Dr		<b>Transaction ID:</b> IE060512.0010165
City State Zip Code Tampa FL 33647-2596	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Reliford Medical Eqpt. & Supplies	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Norm Martin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 3801 University Ave		<b>Transaction ID:</b> IE060512.0010166
City State Zip Code Riverside CA 92501-3247	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Mardel Group Intl.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Charles Pritchett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 222 E 400 S		<b>Transaction ID:</b> IE060512.0010169
City State Zip Code Orem UT 84058-6312	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Acpa	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1329 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Mike K. Vrieze		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 3133 Floyd Blvd		<b>Transaction ID:</b> IE060512.0010171	
City State Zip Code Sioux City IA 51108-1419	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mike K Vrieze	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Chris Lauber		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4974 Commerce Dr		<b>Transaction ID:</b> IE060512.0010177	
City State Zip Code Fredericksbrg VA 22408-2460	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Amazing Glass Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Donald W. Goebel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 655		<b>Transaction ID:</b> IE060512.0010179	
City State Zip Code Altoona PA 16603-0655	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Alto Model Train Museum Association	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1330 / 2352

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Bob Parker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1674 Park Vista Dr		<b>Transaction ID:</b> IE060512.0010182	
City State Zip Code Chico CA 95928-4141	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Parker & Parker General Contracting	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles B. Jackson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 325 Painted Hills Dr		<b>Transaction ID:</b> IE060512.0010183	
City State Zip Code Ivins UT 84738-6082	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jackson Advisors Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Derrick Hahn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 900 Jackson St Ste 180		<b>Transaction ID:</b> IE060512.0010188	
City State Zip Code Dallas TX 75202-4437	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hahn Law Firm PC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1331 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Mark E. Rudek</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 8287 Jody Ln S		<b>Transaction ID:</b> IE060515.0010008	
City Cottage Grove	State MN	Zip Code 55016-4936	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Damarc Quality Inspection Service LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Melody L. Robbins</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 29 Thompson St		<b>Transaction ID:</b> IE060515.0010012	
City Monson	State MA	Zip Code 01057-1014	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C			
Name of Employer Robbins In Nest	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Juan Albarado</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1075 Oak Grove Rd		<b>Transaction ID:</b> IE060515.0010014	
City Concord	State CA	Zip Code 94518-3134	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Bnami Bakery	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1332 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Kim Borchering

Mailing Address 9737 Kings Auto Mall Rd

City State Zip Code  
Cincinnati OH 45249-8243

FEC ID number of contributing federal political committee. **C**

Name of Employer Borchering Enterprises Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: IE060515.0010015

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Don R. Hollingsworth

Mailing Address 2515 Stardust Ln

City State Zip Code  
Amarillo TX 79118-7853

FEC ID number of contributing federal political committee. **C**

Name of Employer Health Insurance Network Texas Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: IE060515.0010016

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stephen P. Martin

Mailing Address 178 Chickasaw Ln

City State Zip Code  
Cape Girardeau MO 63701-8986

FEC ID number of contributing federal political committee. **C**

Name of Employer Hilltop Dental Lab Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: IE060515.0010019

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1333 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. William Shelburn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address PO Box 340		<b>Transaction ID:</b> IE060515.0010020
City State Zip Code Chokoloskee FL 34138-0340	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Everglades Environmental Enterprises	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Daniele Reni		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 1050 Nevada Ave		<b>Transaction ID:</b> IE060515.0010021
City State Zip Code Provo UT 84606-6320	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Enoch Corp.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Elsa Mullins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 4935 Century St NW		<b>Transaction ID:</b> IE060515.0010022
City State Zip Code Huntsville AL 35816-1901	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Secotec Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1334 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Joseph Sotolar Mailing Address PO Box 160143 City State Zip Code Saint Louis MO 63116-8143 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> IE060515.0010023 Amount of Each Receipt this Period 250.00
Name of Employer Tuckpointing Co., Inc. Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Cathy Nguyen Mailing Address 5525 Balcones Dr City State Zip Code Austin TX 78731-4907 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> IE060515.0010025 Amount of Each Receipt this Period 300.00
Name of Employer Cathy's Cleaners Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Marilyn K. Mason Mailing Address 508 1st Ave N City State Zip Code Great Falls MT 59401-2509 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> IE060515.0010026 Amount of Each Receipt this Period 250.00
Name of Employer Health Foods Shop & Deli Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1335 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Melanie J. Taylor

Mailing Address 8901 Red Wing Rd

City Amarillo State TX Zip Code 79119-2587

FEC ID number of contributing federal political committee. **C**

Name of Employer Heritage House Apts. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: IE060515.0010027

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lloyd Peterson, Jr.

Mailing Address 233 Needham St

City Newton Upper Falls State MA Zip Code 02464-1573

FEC ID number of contributing federal political committee. **C**

Name of Employer College Coach LLC Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: IE060515.0010029

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ralph W. Sifford

Mailing Address 11701 SW 152nd St

City Miami State FL Zip Code 33177-1601

FEC ID number of contributing federal political committee. **C**

Name of Employer Grand Prize Motors Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
05 / 15 / 2006

Transaction ID: IE060515.0010032

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1336 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Betty N. Jones</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3953 Kelly St		<b>Transaction ID: IE060515.0010033</b>	
City Jacksonville	State FL	Amount of Each Receipt this Period 300.00	
Zip Code 32207-6761		FEC ID number of contributing federal political committee. C	
Name of Employer Newsom Fence Co. Inc.	Occupation President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 300.00			

Full Name (Last, First, Middle Initial) <b>B. Mr. John J. Crawford</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 590 32nd St SE		<b>Transaction ID: IE060515.0010033</b>	
City Wyoming	State MI	Amount of Each Receipt this Period 150.00	
Zip Code 49548-2345		FEC ID number of contributing federal political committee. C	
Name of Employer Wyoming-Kentwood Area Chamber of	Occupation CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 300.00			

Full Name (Last, First, Middle Initial) <b>C. Mr. Vahe Benlian</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 11715 Andrew Ave		<b>Transaction ID: IE060515.0010037</b>	
City Granada Hills	State CA	Amount of Each Receipt this Period 500.00	
Zip Code 91344-3004		FEC ID number of contributing federal political committee. C	
Name of Employer Benlian Brothers	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1337 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Mario Ruja</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3333 N Mesa St		<b>Transaction ID:</b> IE060515.0010040	
City El Paso	State TX	Zip Code 79902-2031	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Alpha & Omega Wellness Center	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jimmy Fox</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 6713 S Clementine Ct		<b>Transaction ID:</b> IE060515.0010041	
City Tempe	State AZ	Zip Code 85283-4323	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Evergreen Turf Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Larry L. Pugh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 128 Walnut St		<b>Transaction ID:</b> IE060515.0010042	
City Frankfort	State KY	Zip Code 40601-3240	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hair Styles By Larry & Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1338 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sheryl Bridgeford

Mailing Address 155 NE 100th St  
Ste 309

City State Zip Code  
Seattle WA 98125-8014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
First Heritage Esrow Inc. President

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** IE060515.0010043

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Eric J. Easterling

Mailing Address 5109 Vinson Dr

City State Zip Code  
Tampa FL 33610-5508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Watercraven Construction Co. President

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** IE060515.0010050

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ted Faraone

Mailing Address 75 W End Ave  
Apt R9A

City State Zip Code  
New York NY 10023-7885

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Faraone Communications In-c. Owner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** IE060515.0010051

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1339 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Diane E. Benoit

Mailing Address 29 Green St

City State Zip Code  
Concord NH 03301-4021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Diane E Benoit DDS Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** IE060515.0010052

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles Hayes

Mailing Address 4423 Sugarloaf Rd

City State Zip Code  
Hendersonville NC 28792-8849

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Hayes Enterprise Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** IE060515.0010053

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marsha A. Smith

Mailing Address 2810 E 38th St

City State Zip Code  
Indianapolis IN 46218-1230

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Smokin'good Soul Food Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** IE060515.0010056

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1340 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Salma Sanchez

Mailing Address 6031 Knight Arnold Road Ext

City State Zip Code  
Memphis TN 38115-3316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Margarita Candy Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010057

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Dorsey N. Baldwin

Mailing Address 16 Malibu Ct

City State Zip Code  
Baltimore MD 21204-2046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
An Poitin Stil Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010058

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Tim Sambado

Mailing Address 16461 E Comstock Rd

City State Zip Code  
Linden CA 95236-9608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Prima Frutta Packing Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010059

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1341 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Jaurice B. Berry		Date of Receipt MM / DD / YYYY 05 / 15 / 2006
Mailing Address PO Box 158862		<b>Transaction ID:</b> IE060515.0010061
City Nashville	State TN	Zip Code 37215-8862
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer All star Trucks and eqpt.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Harrison D. Willcuts		Date of Receipt MM / DD / YYYY 05 / 15 / 2006
Mailing Address 111 Park Ave		<b>Transaction ID:</b> IE060515.0010062
City W Springfield	State MA	Zip Code 01089-3337
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Segine	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joseph W. Caldwell		Date of Receipt MM / DD / YYYY 05 / 15 / 2006
Mailing Address 2401 Pinson Hwy		<b>Transaction ID:</b> IE060515.0010063
City Birmingham	State AL	Zip Code 35217-2015
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Tiger Machinery Company	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1342 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. David Agbeti		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 1887 San Pablo Ave		<b>Transaction ID:</b> IE060515.0010065	
City State Zip Code Pinole CA 94564-1751	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dixie Business Consultants	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Caroline D. Prickett		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 4200 Summit Bridge Rd		<b>Transaction ID:</b> IE060515.0010067	
City State Zip Code Middletown DE 19709-9340	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Summit Aviation Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Dorothy E. Diedrichsen		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 582 Newman Dr		<b>Transaction ID:</b> IE060515.0010068	
City State Zip Code Arroyo Grande CA 93420-3226	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Housewife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1343 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Mario J. Capuano</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 248 Middle Country Rd Bldg 2		<b>Transaction ID:</b> IE060515.0010069	
City State Zip Code Selden NY 11784-2517	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mario J Capuano DDS	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1550.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Stanley W. Hulett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2164 Hyde St Apt 510		<b>Transaction ID:</b> IE060515.0010070	
City State Zip Code San Francisco CA 94109-1701	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Energy Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard H. Brooker, Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 7400 Spartan Ave		<b>Transaction ID:</b> IE060515.0010071	
City State Zip Code Norfolk VA 23518-4334	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rh Brooker & Associates	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1344 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David L. Smith

Mailing Address 5577 Pearl Rd

City Cleveland State OH Zip Code 44129-2543

FEC ID number of contributing federal political committee. **C**

Name of Employer: A Homeowners Mortgage Company  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2006

Transaction ID: IE060515.0010072

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Fred W. Stuart

Mailing Address 4030 Grey Fox Ct

City Sanford State NC Zip Code 27332-7303

FEC ID number of contributing federal political committee. **C**

Name of Employer: Retired  
Occupation: Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2651.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2006

Transaction ID: IE060515.0010073

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Linda E. Cain

Mailing Address 5031 N Treanor Ave

City Covina State CA Zip Code 91724-1425

FEC ID number of contributing federal political committee. **C**

Name of Employer: Self  
Occupation: Meeting Planner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2006

Transaction ID: IE060515.0010074

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1345 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John N. Depoe, Jr.

Mailing Address 100 Racquet Rd

City State Zip Code  
Sedona AZ 86336-5094

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sedona Racquet & Spa Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010076

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Timothy J. Brophy

Mailing Address PO Box 166

City State Zip Code  
Syracuse NY 13206-0166

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Brophy Services Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010077

Amount of Each Receipt this Period  
1250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Hope Fericola

Mailing Address 115 Morristown Rd  
Rm 202

City State Zip Code  
Bernardsville NJ 07924-2328

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Teamhope PC Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010079

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1346 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Gene E. Carter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2950 Melson Ave		<b>Transaction ID: IE060515.0010080</b>	
City State Zip Code Jacksonville FL 32254-1856	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer G E C Trucking Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Bina Grabill</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 22836 Shell Shore Dr		<b>Transaction ID: IE060515.0010081</b>	
City State Zip Code Bullard TX 75757-8150	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dillo Express Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Jatinder Grewal</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 187 Stanley St		<b>Transaction ID: IE060515.0010084</b>	
City State Zip Code Elk Grove Village IL 60007-1555	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer North Star Distributors Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1347 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Tammy Belohlavek</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 6037 Saltsburg Rd		<b>Transaction ID:</b> IE060515.0010085	
City Verona	State PA	Zip Code 15147-3315	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hugs Away From Home Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Susan Sharp</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1856 Olvera Dr		<b>Transaction ID:</b> IE060515.0010086	
City Woodland	State CA	Zip Code 95776-9384	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Sos Trucking	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Tammy L. Walker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 187		<b>Transaction ID:</b> IE060515.0010089	
City Caryville	State TN	Zip Code 37714-0187	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Natural Sorb Corp. Environmental	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1348 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Phyllis McDonald		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 1062		<b>Transaction ID:</b> IE060515.0010090	
City Ingleside	State TX	Amount of Each Receipt this Period 150.00	
Zip Code 78362-1062		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Days Gone Bye	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Victoria M. Zwissler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 400 Pike St		<b>Transaction ID:</b> IE060515.0010093	
City Cincinnati	State OH	Amount of Each Receipt this Period 250.00	
Zip Code 45215-3147		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Poster Solutions, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Dorothy L. Jones		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2703 Anderson Rd		<b>Transaction ID:</b> IE060515.0010094	
City White Hall	State MD	Amount of Each Receipt this Period 150.00	
Zip Code 21161-9050		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Municipal Opera of Baltimore	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1349 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Peter A. Vanhouten		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2501A Stantonsburg Rd		<b>Transaction ID:</b> IE060515.0010095	
City State Zip Code Greenville NC 27834-7213	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer East Carolina Retina	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Marco Garcia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 159 N 9th St		<b>Transaction ID:</b> IE060515.0010102	
City State Zip Code Noblesville IN 46060-2212	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer M & J Cleaning Services Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Mary C. McCullough		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 8005 Buford Ct		<b>Transaction ID:</b> IE060515.0010103	
City State Zip Code Richmond VA 23235-5260	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hair On Broadway Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1350 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark L. Ellis

Mailing Address 1826 Northwood Dr

City State Zip Code  
Troy MI 48084-5522

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Great Western Technologies Inc.

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010104

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Leroy C. Bell, Jr.

Mailing Address 2310 N Charles St

City State Zip Code  
Baltimore MD 21218-5127

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Urban Behavioral Associates

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010105

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Kimberly Hardin-Morey

Mailing Address 483 Walker Dr

City State Zip Code  
McDonough GA 30253-7413

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Ace Educ. Project

Occupation  
CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010106

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1351 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Van T. Tran

Mailing Address 2445 Winnetka Ave N

City State Zip Code  
Minneapolis MN 55427-3598

FEC ID number of contributing federal political committee. **C**

Name of Employer Veritec Inc. Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010107

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Guido Babore

Mailing Address 129 N Broadway Fl 3

City State Zip Code  
Camden NJ 08102-1144

FEC ID number of contributing federal political committee. **C**

Name of Employer Abr. Consultants LLC Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010109

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. W. Simpson

Mailing Address 405 E Park St

City State Zip Code  
Benton IL 62812-1971

FEC ID number of contributing federal political committee. **C**

Name of Employer W R Simpson DDS Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010111

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1450.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1352 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. James A. Thompson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 679 S State College Blvd Ste J		<b>Transaction ID:</b> IE060515.0010112	
City Fullerton      State CA      Zip Code 92831-5117	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer J Allen Thompson Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Nancy Dobbs		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 846 S Big A Rd		<b>Transaction ID:</b> IE060515.0010113	
City Toccoa      State GA      Zip Code 30577-3810	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Restaurant Mgmt.	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Henry Cannady		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 8916 163rd St		<b>Transaction ID:</b> IE060515.0010114	
City Jamaica      State NY      Zip Code 11432-5049	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cannady Security Svc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1353 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Paola Bernat-Pozo

Mailing Address 6290 SW 42nd Ter

City Miami State FL Zip Code 33155-5161

FEC ID number of contributing federal political committee. **C**

Name of Employer Intl. Trading & Distribution  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010116

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gary Beasley

Mailing Address 1907 Paramount Ave

City Austin State TX Zip Code 78704-3239

FEC ID number of contributing federal political committee. **C**

Name of Employer Gary Beasley Financial Services  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010120

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Connie Hampton

Mailing Address 10050 W 41st Ave

City Wheat Ridge State CO Zip Code 80033-4157

FEC ID number of contributing federal political committee. **C**

Name of Employer Pain Centers of America Inc.  
Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010121

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1354 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Keel

Mailing Address 1137 6th St NW

City State Zip Code  
Rochester MN 55901-1824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Exotic World of Fish Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** IE060515.0010123

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Norman H. O'Bryant

Mailing Address 25173 New Market Rd

City State Zip Code  
Courtland VA 23837-2005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Southern Tent Co. Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** IE060515.0010128

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edward W. Kramer

Mailing Address 501 W Main St

City State Zip Code  
Fredericksburg TX 78624-3129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jek's Pit Stop President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

**Transaction ID:** IE060515.0010130

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1355 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph F. Garcia

Mailing Address 135 Pinelawn Rd Ste 220  
Ste. 220N

City State Zip Code  
Melville NY 11747-3198

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Garcia and Stallion Partner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2006

Transaction ID: IE060515.0010132

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Sean Nelthropp

Mailing Address 153 W 27th St  
Ste 1205

City State Zip Code  
New York NY 10001-6203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
B & K Leather Stripping Inc. President

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2006

Transaction ID: IE060515.0010133

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Parrella

Mailing Address 42 Milford St

City State Zip Code  
Medway MA 02053-1631

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Paramount Industries Inc. President

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2006

Transaction ID: IE060515.0010135

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1356 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John J. Milbauer		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 9707 Juniper Ct N		<b>Transaction ID:</b> IE060515.0010138	
City State Zip Code Forest Lake MN 55025-9174	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Patriot Bank	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. George Daly		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 15 Newtown Woods Rd		<b>Transaction ID:</b> IE060515.0010139	
City State Zip Code Newtown Square PA 19073-3916	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Polymer. Solutions Intl. Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Todd C. Henricks		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address PO Box 110		<b>Transaction ID:</b> IE060515.0010140	
City State Zip Code Cerro Gordo IL 61818-0110	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Chapman Henricks Insurance	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1357 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bruce Hoy

Mailing Address 8856 New Castle Dr

City State Zip Code  
Fort Myers FL 33908-5657

FEC ID number of contributing federal political committee. **C**

Name of Employer Beh Consulting Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: IE060515.0010143

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Phillip L. Gray

Mailing Address 110A N McPherson Rd

City State Zip Code  
Orange CA 92869-3721

FEC ID number of contributing federal political committee. **C**

Name of Employer J & P Plumbing Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: IE060515.0010145

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frank Coelho

Mailing Address PO Box 578644  
3130 Dewitt Rd

City State Zip Code  
Modesto CA 95357-1212

FEC ID number of contributing federal political committee. **C**

Name of Employer Coelho Dairy Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: IE060515.0010146

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1358 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Raymond A. Santiago, Jr.

Mailing Address 2901 E Main St

City State Zip Code  
Ventura CA 93003-4755

FEC ID number of contributing federal political committee. **C**

Name of Employer Automotive Financial Services, Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010148

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Christian J. Phelps

Mailing Address 518 Suite 518 Suite

City State Zip Code  
Spokane WA 99201

FEC ID number of contributing federal political committee. **C**

Name of Employer Christian Phelps Ps. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010150

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Sherin Lee

Mailing Address 2346 Carnation Dr

City State Zip Code  
Crest Hill IL 60435-0664

FEC ID number of contributing federal political committee. **C**

Name of Employer Herb Rx Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010153

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1359 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Linda S. Yates</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 17 Sherington Dr Ste E		<b>Transaction ID: IE060515.0010154</b>	
City Bluffton	State SC	Zip Code 29910-6039	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Exit Island Realty	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. James M. Godbe</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 12722 Highway 3 Ste N Ste. N		<b>Transaction ID: IE060515.0010155</b>	
City Webster	State TX	Zip Code 77598-1507	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Marble Products, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Margaret B. Lynch</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 23 S College St		<b>Transaction ID: IE060515.0010156</b>	
City Winchester	State TN	Zip Code 37398-2623	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lynch & Lynch Realtors	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1360 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jeremy B. Emmons		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address HC 87 Box 51		<b>Transaction ID:</b> IE060515.0010159	
City Volborg	State MT	Zip Code 59351-9603	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer JE Rod & Repair LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Colleen Lahey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 69 Highland Shores Rd		<b>Transaction ID:</b> IE060515.0010160	
City Casco	State ME	Zip Code 04015-3103	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Liberty Mutual Insurance	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Dante J. Giammarco		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 55 Dorrance St		<b>Transaction ID:</b> IE060515.0010161	
City Providence	State RI	Zip Code 02903-2221	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Visconti & Boren Ltd	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1361 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Lucy Valencia		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 161 US Highway 27 S		<b>Transaction ID:</b> IE060515.0010162	
City State Zip Code South Bay FL 33493-2213	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Valencia Medical Care Center	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Bev Church		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 712 S Pearl St		<b>Transaction ID:</b> IE060515.0010163	
City State Zip Code Denver CO 80209-4213	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer United Mgmt. Services Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Max A. Heeb		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 928 Hawthorn Dr		<b>Transaction ID:</b> IE060515.0010164	
City State Zip Code Sikeston MO 63801-4714	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1362 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael J. Cockle

Mailing Address 2452 Montavista PI W

City State Zip Code  
Seattle WA 98199-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010165

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Theodore N. Danforth

Mailing Address PO Box 508

City State Zip Code  
Locust Valley NY 11560-0508

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010166

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Tom Klamet

Mailing Address 10055 Sweet Valley Dr

City State Zip Code  
Cleveland OH 44125-4245

FEC ID number of contributing federal political committee. **C**

Name of Employer Improvita Health Products, Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010167

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1363 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas L. Babich

Mailing Address 379 E Sibley Blvd

City State Zip Code  
Harvey IL 60426-1960

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hi-hard Corp. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** IE060515.0010168

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. J. Kerby

Mailing Address 2910 Fritz Rd

City State Zip Code  
Harvard IL 60033-9611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
C & J Mechanical, Inc. Vice President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** IE060515.0010169

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jimmy W. Evans

Mailing Address 1504 San Antonio St Ste 200

City State Zip Code  
Austin TX 78701-1613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Governmental Affairs Ltd. Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** IE060515.0010171

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1150.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1364 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Christopher F. Skilnik		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 11137 Wisconsin Ct		<b>Transaction ID:</b> IE060515.0010172	
City State Zip Code Orland Park IL 60467-9384	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mblo Funding	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Judith B. Adams		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 3503 Meadow Ln		<b>Transaction ID:</b> IE060515.0010174	
City State Zip Code Glenview IL 60025-3936	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael W. Shaw		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 210 Compton Dr		<b>Transaction ID:</b> IE060515.0010176	
City State Zip Code Waxahachie TX 75167-9225	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Airport Product Installers LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1365 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Don Ford		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 555 S Ih 35 Ste 308		<b>Transaction ID:</b> IE060515.0010177	
City State Zip Code New Braunfels TX 78130-4889	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wespac Energy Llc	Occupation Member		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard J. Muto, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 2944 Plantation Rd		<b>Transaction ID:</b> IE060515.0010178	
City State Zip Code Winter Haven FL 33884-1232	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer High Performance Systems	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Craig Etchegoyen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3151 Airway Ave Ste T1 3151 Airway Ave Ste T1		<b>Transaction ID:</b> IE060515.0010179	
City State Zip Code Costa Mesa CA 92626-4627	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Basque Financial Services	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1366 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Emanuel H. Torbati		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 625 Broadway Ste 915		<b>Transaction ID:</b> IE060515.0010180	
City State Zip Code San Diego CA 92101-5416	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Interstate Holdings	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Pedro E. Racelis, III		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 1746 Cole Blvd Ste 225		<b>Transaction ID:</b> IE060515.0010182	
City State Zip Code Lakewood CO 80401-3208	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer China Wireless Communicat-ions	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3100.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Verda L. Deveny		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 9445 Grand Mesa Dr		<b>Transaction ID:</b> IE060515.0010183	
City State Zip Code Las Vegas NV 89134-8933	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1367 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Nikki Griffith

Mailing Address 632 E Redfield Rd

City State Zip Code  
Gilbert AZ 85234-4675

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Griffith & Associates Adm- Broker  
-inist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010184

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Louise Ettlich

Mailing Address 14705 Williamsburg St

City State Zip Code  
Riverview MI 48193-7605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
561.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010187

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Jess Ann Logsdon

Mailing Address 9895 Ringgold Rd

City State Zip Code  
Shawneetown IL 62984-3623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Agararian Enterprises Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010188

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1368 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Carol J. Kohles		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 5230 S 40th St Apt 73C		<b>Transaction ID:</b> IE060515.0010189	
City Lincoln	State NE	Zip Code 68516-4533	Amount of Each Receipt this Period 1250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kohles Investment	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1550.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Gregory H. Arabian		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 489 Mount Auburn St		<b>Transaction ID:</b> IE060515.0010190	
City Watertown	State MA	Zip Code 02472-4194	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gregory H. Arabian & Associates	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Danny L. Petersen		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 520 Kansas City St Ste 305		<b>Transaction ID:</b> IE060515.0010191	
City Rapid City	State SD	Zip Code 57701-2795	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Grunt	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1369 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Harriet Storrs

Mailing Address 494 Mount Vernon Cir

City State Zip Code  
Golden CO 80401-1203

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Weight Mastery Clinic Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 426.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** IE060515.0010192

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Geral Sartwell

Mailing Address 4313 Baywood Way

City State Zip Code  
Sacramento CA 95864-0813

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1171.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** IE060515.0010194

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ray Ray Hurst

Mailing Address 3607 Arrowhead Dr

City State Zip Code  
Austin TX 78731-4803

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

**Transaction ID:** IE060515.0010196

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1650.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1370 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ed Ray

Mailing Address 4114 Riverhaven St

City Pasco State WA Zip Code 99301-3008

FEC ID number of contributing federal political committee. **C**

Name of Employer Conover Insurance Occupation Insurance Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: IE060515.0010197

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David R. Clare

Mailing Address 972 Lake House Dr

City North Palm Beach State FL Zip Code 33408-3361

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: IE060515.0010198

Amount of Each Receipt this Period  
1250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frantz G. Christensen

Mailing Address 2655 6th Ave S

City St Petersburg State FL Zip Code 33712-1642

FEC ID number of contributing federal political committee. **C**

Name of Employer Conveyor Industries Corp. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 6

Transaction ID: IE060515.0010199

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1371 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. William R. Lampley, Jr. Mailing Address 1668 Saddle Ln City State Zip Code Southaven MS 38671-8740 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> IE060515.0010200 Amount of Each Receipt this Period 500.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Vladimir J. Salava Mailing Address 2800 Croasdaile Dr City State Zip Code Durham NC 27705-2539 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> IE060515.0010201 Amount of Each Receipt this Period 250.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Rickey L. Dice Mailing Address 63970 Johnson Rnch City State Zip Code Springfield OR 97477 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> IE060515.0010202 Amount of Each Receipt this Period 5000.00
Name of Employer Self Occupation Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1372 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul J. Derania

Mailing Address 1541 The Alameda

City State Zip Code  
San Jose CA 95126-2311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Law Office of Paul J Derania Lawyer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010203

Amount of Each Receipt this Period  
1250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Antonio Pena

Mailing Address 6560 Scott Ln

City State Zip Code  
Las Cruces NM 88012-6519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
La Familia Tile Installation Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010206

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. George Glauser, Jr.

Mailing Address 1912 Sidewinder Dr # 200

City State Zip Code  
Park City UT 84060-7256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Victory Ranch Partners Partner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010207

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1373 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John Noell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 3660 Stoneridge Rd Ste E101		<b>Transaction ID:</b> IE060515.0010208
City State Zip Code Austin TX 78746-7759	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Urban Design Group	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael H. Kutner		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 1518 Clifton Rd NE		<b>Transaction ID:</b> IE060515.0010209
City State Zip Code Atlanta GA 30322-4201	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Michael H Kutner Consulting	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Dolores Marshall		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address PO Box 824 120 Royal St		<b>Transaction ID:</b> IE060515.0010210
City State Zip Code Salado TX 76571-0824	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Springhouse Salado	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1374 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dan Lovell

Mailing Address 2200 Woodcrest Pl  
Ste 210

City Birmingham State AL Zip Code 35209-1324

FEC ID number of contributing federal political committee. **C**

Name of Employer Graham & Co. Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010211

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. R. Bellet

Mailing Address 102 Osborne Ave

City Bay Head State NJ Zip Code 08742-4619

FEC ID number of contributing federal political committee. **C**

Name of Employer Shore Bet Painting & Construction Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010212

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark W. Stettler

Mailing Address 13 Pinehurst Dr

City Mount Sinai State NY Zip Code 11766-3421

FEC ID number of contributing federal political committee. **C**

Name of Employer Vector Architecture & Design Service Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2006

Transaction ID: IE060515.0010213

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1375 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Larry Limp</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address PO Box 192		<b>Transaction ID:</b> IE060515.0010214	
City Bedford	State IN	Zip Code 47421-0192	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer LNL Trucking Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Mark J. Marentic</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 46983 Liberty Dr		<b>Transaction ID:</b> IE060515.0010215	
City Wixom	State MI	Zip Code 48393-3694	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Intouch Automation Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Heather A. Clausen</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1655 N 15th St		<b>Transaction ID:</b> IE060515.0010216	
City Coos Bay	State OR	Zip Code 97420-2156	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Clean Rivers Erosion Control	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1376 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William Lara		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 3407 W Charleston Blvd		<b>Transaction ID:</b> IE060515.0010218	
City State Zip Code Las Vegas NV 89102-1837	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Integrated Contractors	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kevin Lyons		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 1620 Bank St		<b>Transaction ID:</b> IE060515.0010219	
City State Zip Code Louisville KY 40203-1314	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Creative Packaging Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Larry Martin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 108 Patton Way		<b>Transaction ID:</b> IE060515.0010220	
City State Zip Code Elkton MD 21921-5174	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Countrywide Full Spectrum LNDN	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1377 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. John Richie Mailing Address 2107 Sonata Ln City State Zip Code Carrollton TX 75007-2224 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> IE060515.0010235 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Cool Breeze Consulting Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Daniel Herrera Mailing Address 885 SE 47th Ter Ste B City State Zip Code Cape Coral FL 33904-9079 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> IE060516.0010001 Amount of Each Receipt this Period 700.00
Name of Employer Occupation 5th Manhattan Project Corp. INFO REQUESTED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 700.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Nelson Orta Mailing Address 13370 SW 131st St Ste 105 Ste 105 City State Zip Code Miami FL 33186-5856 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> IE060516.0010007 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Nelco Testing & Engineering Services President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1378 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ray Hoffman, III

Mailing Address 591 Redwood Hwy  
Ste 5000

City Mill Valley State CA Zip Code 94941-3064

FEC ID number of contributing federal political committee. **C**

Name of Employer Hoffman Development Co. Occupation Self Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	6

Transaction ID: IE060516.0010010

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Anne E. Estabrook

Mailing Address PO Box 677  
235 Birchwood Ave

City Kenilworth State NJ Zip Code 07033-0677

FEC ID number of contributing federal political committee. **C**

Name of Employer Elberon Development Co. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	6

Transaction ID: IE060516.0010011

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William G. Glynn

Mailing Address 1802 E Barefoot Pl

City Vero Beach State FL Zip Code 32963-4548

FEC ID number of contributing federal political committee. **C**

Name of Employer Michael Thorpe Real Estate, Inc. Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	6

Transaction ID: IE060516.0010013

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1379 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Renee A. Baca-Day		Date of Receipt
Mailing Address 920 S Main St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City	State	Zip Code
Belen	NM	87002-3314
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> IE060516.0010014
Name of Employer Renee Antoinettes School of Dance		Amount of Each Receipt this Period
Occupation Owner		<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		300.00
Aggregate Year-to-Date ▼		<input type="text"/>
		300.00

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. James A. Brazil		Date of Receipt
Mailing Address PO Box 1006		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City	State	Zip Code
Cadiz	KY	42211-1006
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> IE060516.0010017
Name of Employer James A Brazil MD		Amount of Each Receipt this Period
Occupation Owner		<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		500.00
Aggregate Year-to-Date ▼		<input type="text"/>
		500.00

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Frank Ting		Date of Receipt
Mailing Address 2935 Kessler Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City	State	Zip Code
Paris	TX	75460-3338
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> IE060516.0010020
Name of Employer China Star Restaurant		Amount of Each Receipt this Period
Occupation Owner		<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		700.00
Aggregate Year-to-Date ▼		<input type="text"/>
		700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1380 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Leonard J. Cerny, II		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 746 E Chapman Ave		<b>Transaction ID:</b> IE060516.0010022	
City State Zip Code Orange CA 92866-1621	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cerny Smith	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles M. Pilkilton, II		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 84 NE Loop 410 Ste 100		<b>Transaction ID:</b> IE060516.0010025	
City State Zip Code San Antonio TX 78216-5803	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Key Ad LLC	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Russell Cascardo		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address PO Box 200825		<b>Transaction ID:</b> IE060516.0010026	
City State Zip Code Jamaica NY 11420-0825	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fleet Recovery	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1381 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Robert Nuylan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 1834		<b>Transaction ID:</b> IE060516.0010027	
City State Zip Code Spring Valley CA 91979-1834	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Heavy Metal Environmental Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Diane Bickle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 3435 E Red Bridge Rd		<b>Transaction ID:</b> IE060516.0010030	
City State Zip Code Kansas City MO 64137-2133	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Glad Heart Realty	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Alex W. Nelson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 108 Sherborne Ln		<b>Transaction ID:</b> IE060516.0010032	
City State Zip Code Columbia SC 29229-7376	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Executive Homes Unlimited LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1382 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Stockton

Mailing Address 1620 Riverview Rd

City State Zip Code  
Riverton WY 82501-5906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Western Family Care Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** IE060516.0010034

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Erby L. Kenerson

Mailing Address 6852 S Forest St

City State Zip Code  
Centennial CO 80122-2339

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Front Range Hydro LLC CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** IE060516.0010037

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Wayne Moss

Mailing Address 370 Evitt Cemetery Rd

City State Zip Code  
Cashiers NC 28717-9644

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Norton Creek Farms Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** IE060516.0010039

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1383 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David G. Koch

Mailing Address 170 Old Country Rd  
Ste 315

City Mineola State NY Zip Code 11501-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer David G Koch Esq. Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010040

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steve R. Lee

Mailing Address 2602 McKinney Ave  
Ste 450

City Dallas State TX Zip Code 75204-8693

FEC ID number of contributing federal political committee. **C**

Name of Employer Quicksilver Interactive Group Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010041

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Klabunde

Mailing Address 600 W Grant St

City Phoenix State AZ Zip Code 85003-2407

FEC ID number of contributing federal political committee. **C**

Name of Employer Classic Granite & Marble Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010043

Amount of Each Receipt this Period  
1250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1384 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Don L. Gifford		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 4045 E Post Rd		<b>Transaction ID:</b> IE060516.0010044	
City Las Vegas	State NV	Zip Code 89120-3966	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Gifford Consulting Group LLC	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Samuel C. Ngwu		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 5959 Harry Hines Blvd Ste 204		<b>Transaction ID:</b> IE060516.0010045	
City Dallas	State TX	Zip Code 75235-5319	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Samuel C. Ngwu MD, Pa	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. John E. Barber		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 601 E San Antonio St Ste 501		<b>Transaction ID:</b> IE060516.0010046	
City Victoria	State TX	Zip Code 77901-6052	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Victoria Surgical Associates	Occupation Surgeon		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1385 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John W. Kaufmann		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 38423 N Drexel Blvd		<b>Transaction ID:</b> IE060516.0010047	
City State Zip Code Antioch IL 60002-9780	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Johntrina Food Service In-c.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Mark Huber		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 116 S Main St Ste 107		<b>Transaction ID:</b> IE060516.0010049	
City State Zip Code Enterprise AL 36330-2556	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rawls of Enterprise LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Gwendolyn Castleberry		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 115 S La Brea Ave		<b>Transaction ID:</b> IE060516.0010051	
City State Zip Code Inglewood CA 90301-1713	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer G G S Restaurant Bakery	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1386 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Frederick D. Williams		Date of Receipt MM / DD / YYYY 05 / 16 / 2006
Mailing Address 1506 Centinela Ave		<b>Transaction ID:</b> IE060516.0010054
City Inglewood	State CA	Zip Code 90302-1144
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 700.00	
Name of Employer Williams Frederick MD	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Marc Cooper		Date of Receipt MM / DD / YYYY 05 / 16 / 2006
Mailing Address 610 Thimble Shoals Blvd Ste 403A		<b>Transaction ID:</b> IE060516.0010055
City Newport News	State VA	Zip Code 23606-4509
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 700.00	
Name of Employer The Vocational Co., Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Rita Cantwell		Date of Receipt MM / DD / YYYY 05 / 16 / 2006
Mailing Address 3242 Hobbs Rd		<b>Transaction ID:</b> IE060516.0010058
City Amarillo	State TX	Zip Code 79109-3224
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00	
Name of Employer Nurses By Prescription Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1387 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Timothy W. Mehallick

Mailing Address PO Box 75

City State Zip Code  
Scottsdale PA 15683-0075

FEC ID number of contributing federal political committee. **C**

Name of Employer: Moisture Control Associates Inc.  
Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010063

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Patricia T. Alpert

Mailing Address 3235 S Eastern Ave

City State Zip Code  
Las Vegas NV 89109-3310

FEC ID number of contributing federal political committee. **C**

Name of Employer: Fastmedx  
Occupation: CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010064

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Cres Smith

Mailing Address 5320 Sharon Marie Ct

City State Zip Code  
Las Vegas NV 89118-1832

FEC ID number of contributing federal political committee. **C**

Name of Employer: Hacienda Adult Care of Spring Valley  
Occupation: Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010065

Amount of Each Receipt this Period  
350.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1388 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Lisa Peteler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 8985 Fontana Del Sol Way		<b>Transaction ID:</b> IE060516.0010066
City State Zip Code Naples FL 34109-4398	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Advertisingworks Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Lynn Hutton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 404 Camino Del Rio S Ste 300		<b>Transaction ID:</b> IE060516.0010067
City State Zip Code San Diego CA 92108-3586	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Innovasystems Intl. LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Pierre E. Augustin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 18211A Jamaica Ave		<b>Transaction ID:</b> IE060516.0010070
City State Zip Code Jamaica NY 11423-2327	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Universal Distributors In- c.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1389 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Val Burd

Mailing Address 1025C Raceplex Rd

City Alton State VA Zip Code 24520-3619

FEC ID number of contributing federal political committee. **C**

Name of Employer Val Burd Racing Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: IE060516.0010076

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joe L. Schindler

Mailing Address 633 Oakland Rd

City Schulenburg State TX Zip Code 78956-5274

FEC ID number of contributing federal political committee. **C**

Name of Employer Prime Industries LLP Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: IE060516.0010077

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Allyn Perkins

Mailing Address 1909 Ritner Hwy Ste 2

City Carlisle State PA Zip Code 17013-9310

FEC ID number of contributing federal political committee. **C**

Name of Employer Allyn Perkins DMD Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: IE060516.0010079

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1390 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Tracy L. Acord</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 997 Cherokee Trce		<b>Transaction ID: IE060516.0010082</b>	
City State Zip Code White Oak TX 75693-3531	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Celtex Industries Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Jennifer J. Maeng</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 81 Saint Marks Pl		<b>Transaction ID: IE060516.0010083</b>	
City State Zip Code New York NY 10003-7904	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Korean Temple Cuisine	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Larisa Saltsova</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 111 Buck Rd Ste 3		<b>Transaction ID: IE060516.0010084</b>	
City State Zip Code Huntingdon Valley PA 19006-1544	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Integrated Commercial Enterprises	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1391 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joshua M. Gochnauer

Mailing Address 3350 Wilkens Ave  
Ste 303

City Baltimore State MD Zip Code 21229-4618

FEC ID number of contributing federal political committee. **C**

Name of Employer Life Fitness Physical Therapy  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: IE060516.0010085

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Anthony Buraty

Mailing Address 574 Newark Pompton Tpk

City Pompton Plains State NJ Zip Code 07444-1746

FEC ID number of contributing federal political committee. **C**

Name of Employer Home Town Market Incorporated  
Occupation Supermarket

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: IE060516.0010088

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Dimatteo

Mailing Address 8907 164th Ave

City Howard Beach State NY Zip Code 11414-3637

FEC ID number of contributing federal political committee. **C**

Name of Employer JDM Entertainment LLC-Area Event  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: IE060516.0010089

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1392 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gary R. King

Mailing Address 30950 Rancho Viejo Rd 115

City State Zip Code  
San Juan Capistran CA 92675-1764

FEC ID number of contributing federal political committee. **C**

Name of Employer Gary R King & Associates Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010090

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert Miller

Mailing Address 2 Euclid Ave

City State Zip Code  
Glassboro NJ 08028-1302

FEC ID number of contributing federal political committee. **C**

Name of Employer Ironside Security Network Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010092

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Neil Grosz

Mailing Address 13750 High Sierra

City State Zip Code  
Austin TX 78737-9537

FEC ID number of contributing federal political committee. **C**

Name of Employer High Sierra Technical LLC Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010094

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1393 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ziad K. Abdelnour

Mailing Address 445 Park Ave Fl 9

City State Zip Code  
New York NY 10022-8632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Blackhawk Partners Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** IE060516.0010095

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Shirley P. Harris

Mailing Address 73 Old Sudbury Rd

City State Zip Code  
Wayland MA 01778-1808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5100.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** IE060516.0010097

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. June Simpson

Mailing Address 1410 N West Shore Blvd  
Ste 500

City State Zip Code  
Tampa FL 33607-4532

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Health Advocates Inc President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

**Transaction ID:** IE060516.0010098

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1394 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Abdelbaset Youssef		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 388 Inkster Rd		<b>Transaction ID:</b> IE060516.0010099	
City State Zip Code Inkster MI 48141-1209	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Physician	Aggregate Year-to-Date ▼ 5200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jack Van Artsdalen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 300279		<b>Transaction ID:</b> IE060516.0010100	
City State Zip Code Escondido CA 92030-0279	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Van Artsdalen Insurance Occupation Owner	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Anthony Vasilas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 80 Gristmill Ln		<b>Transaction ID:</b> IE060516.0010101	
City State Zip Code Manhasset NY 11030-1108	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 401.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1395 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Laura Anderson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 8344 Florence Ave		<b>Transaction ID:</b> IE060516.0010103	
City State Zip Code Downey CA 90240-3943	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A-1 Tours & Travel	Occupation Travel Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Thomas W. Morris</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 5544 Ash Grove Cir		<b>Transaction ID:</b> IE060516.0010104	
City State Zip Code Montgomery AL 36116-1150	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Sunant Cramer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 5911 Hesperia Ave		<b>Transaction ID:</b> IE060516.0010105	
City State Zip Code Encino CA 91316-1015	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jan Sen	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1396 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Amjad A. Hammad</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 945 W Atlantic Ave		<b>Transaction ID: IE060516.0010106</b>	
City State Zip Code Delray Beach FL 33444-2563	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Community Food Store	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2850.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Craig H. Rhyne</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 815 Lowcountry Blvd		<b>Transaction ID: IE060516.0010108</b>	
City State Zip Code Mount Pleasant SC 29464-3024	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Craig H Rhyne DMD LLC	Occupation Dentist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. James T. Henderson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1570 East Ave Apt 820 Apt 820 Valley Manor		<b>Transaction ID: IE060516.0010109</b>	
City State Zip Code Rochester NY 14610-1642	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1397 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Schuman S. Tu		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 16005 24th Rd		<b>Transaction ID:</b> IE060516.0010110	
City State Zip Code Whitestone NY 11357-3942	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Maxin Capital Corp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2800.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John W. Taylor		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 245 Mission Rd		<b>Transaction ID:</b> IE060516.0010111	
City State Zip Code Sedona AZ 86336-4637	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Aziz Doumit		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 30 W Highway D		<b>Transaction ID:</b> IE060516.0010112	
City State Zip Code New Melle MO 63365-9998	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer St. Charles Er Physi	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1398 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Louis W. Meeks</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1101 Beacon St Apt 5W		<b>Transaction ID: IE060516.0010113</b>	
City Brookline State MA Zip Code 02446-5587	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Meeks Zilberfarb Orthopedics Occupation President	Aggregate Year-to-Date ▼ 1250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Ms. Tina F. Siemens</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 104 County Road 400L		<b>Transaction ID: IE060516.0010115</b>	
City Seminole State TX Zip Code 79360-5605	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer J W & T Inc. Occupation Owner	Aggregate Year-to-Date ▼ 1500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Lykes M. Boykin</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 212 Coral Cay Ter		<b>Transaction ID: IE060516.0010116</b>	
City Palm Beach Gardens State FL Zip Code 33418-4002	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lbbm Holdings Inc. Occupation PRINCIPAL	Aggregate Year-to-Date ▼ 1250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1399 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Patricia J. Whitehead

Mailing Address PO Box 4246

City State Zip Code  
Bisbee AZ 85603-4246

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sierra Vista Regional Health Nurse

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010117

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Christopher Hanson

Mailing Address 2247 Central Ave

City State Zip Code  
Alameda CA 94501-4410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hanson Briggs Law Firm Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010118

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert Muller

Mailing Address 4 Atrium Dr

City State Zip Code  
Albany NY 12205-1441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Executive Woods Childcare Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3050.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010119

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1400 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. John H. Fournier, MD

Mailing Address 5201 N Harlem Ave

City State Zip Code  
Chicago IL 60656-1803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ocular Associates Ltd. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010120

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. John S. Lybarger

Mailing Address 8489 W 95th Dr

City State Zip Code  
Westminster CO 80021-5330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lybarger & Associates Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010124

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gary D. Moore

Mailing Address 1300 S Broadway St

City State Zip Code  
Carrollton TX 75006-7220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Moore Earnheart & Associates President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: IE060516.0010125

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1401 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael Reppas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 7850 NW 146th St Ste 301		<b>Transaction ID:</b> IE060516.0010127	
City Miami Lakes	State FL	Zip Code 33016-1519	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Law Office of Michael J Reppas, Pa	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Brian Deeley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1300 Gardiner Ln		<b>Transaction ID:</b> IE060516.0010129	
City Louisville	State KY	Zip Code 40213-1967	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Deeley Merimee & Sleadd LLC	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Dan Houston		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 165 Amesbury Rd		<b>Transaction ID:</b> IE060516.0010131	
City Kensington	State NH	Zip Code 03833-6726	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Houston Holdings LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1402 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Hasit Patel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 812 N Main St		<b>Transaction ID:</b> IE060516.0010132	
City Glennville	State GA	Amount of Each Receipt this Period 500.00	
Zip Code 30427-2209		FEC ID number of contributing federal political committee. C	
Name of Employer Tattnall Hospitality	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ray Pacioni		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 2833 N Central Ave		<b>Transaction ID:</b> IE060516.0010133	
City Phoenix	State AZ	Amount of Each Receipt this Period 300.00	
Zip Code 85004-1031		FEC ID number of contributing federal political committee. C	
Name of Employer Fairmount Corp. Real Estate & Investme	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William Goggin		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 2706 River Rd		<b>Transaction ID:</b> IE060516.0010138	
City Yakima	State WA	Amount of Each Receipt this Period 300.00	
Zip Code 98902-1135		FEC ID number of contributing federal political committee. C	
Name of Employer Gray Surveying & Engineering	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1403 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Eugene W. Dolata		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 515 Carswell Ave Ste 102		<b>Transaction ID:</b> IE060516.0010139	
City State Zip Code Holly Hill FL 32117-4459	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Depree Rum Cakes LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles R. Summers		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1004 Bullard Ct Ste 104C		<b>Transaction ID:</b> IE060516.0010141	
City State Zip Code Raleigh NC 27615-6854	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Wakefield Insurance Agency	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Don Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 646 Delsea Dr		<b>Transaction ID:</b> IE060516.0010142	
City State Zip Code Pitman NJ 08071-1232	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Trinity Cnstr. Mgmt. Services LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1404 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Thomas F. Felcon

Mailing Address 610 Broadway Ste 3

City State Zip Code  
 Brooklyn NY 11206-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Tap 116 Drywall Carpentry Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

**Transaction ID:** IE060516.0010145

Amount of Each Receipt this Period  
 600.00

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Salvadore E. Sanchez

Mailing Address 2912 S Highland Dr Ste O

City State Zip Code  
 Las Vegas NV 89109-1035

FEC ID number of contributing federal political committee. **C**

Name of Employer Stevens Metal Forming Co. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

**Transaction ID:** IE060516.0010146

Amount of Each Receipt this Period  
 600.00

**C.** Full Name (Last, First, Middle Initial)  
 Mr. Chris Sorensen

Mailing Address 111 N Michigan Ave

City State Zip Code  
 Bradley IL 60915-1634

FEC ID number of contributing federal political committee. **C**

Name of Employer Midwest Integrated Solutions Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

**Transaction ID:** IE060516.0010147

Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1405 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Maria Torres</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 18752 Wexford Ter		<b>Transaction ID: IE060516.0010148</b>	
City State Zip Code Jamaica NY 11432-2453	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Capital Increase Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Tamara Casey</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 2510 Anthem Village Dr # 105		<b>Transaction ID: IE060516.0010149</b>	
City State Zip Code Henderson NV 89052-5555	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Supershag Vegas Dance Complex	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Douglas Picanso</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2006	
Mailing Address 4800 Easton Dr Ste 101		<b>Transaction ID: IE060516.0010150</b>	
City State Zip Code Bakersfield CA 93309-9423	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Aj Environmental Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1406 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Joy Harris-Cobb		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 23214 Airport St		<b>Transaction ID:</b> IE060516.0010152	
City State Zip Code Petersburg VA 23803-6912	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Harris & Associates Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Deborah Buchanan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 8291 Andalusian Dr		<b>Transaction ID:</b> IE060516.0010153	
City State Zip Code Sacramento CA 95829-6519	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Buchanan Co. LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jeff Reed		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 8901 Pacific Ave NW		<b>Transaction ID:</b> IE060516.0010155	
City State Zip Code Silverdale WA 98383-9117	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jeff E Reed	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1407 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jeff L. Reynolds		Date of Receipt MM / DD / YYYY 05 / 16 / 2006
Mailing Address 13660 Hemlock Ln N		<b>Transaction ID:</b> IE060516.0010157
City Dayton	State MN	Zip Code 55327-9532
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Salesman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 511.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Anthony Damato		Date of Receipt MM / DD / YYYY 05 / 16 / 2006
Mailing Address 50 Bay Ave		<b>Transaction ID:</b> IE060516.0010158
City Ronkonkoma	State NY	Zip Code 11779-5422
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Edelta Consulting Inc.	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. George R. Lunsford		Date of Receipt MM / DD / YYYY 05 / 16 / 2006
Mailing Address 8 W Way Ct		<b>Transaction ID:</b> IE060516.0010159
City Lake Jackson	State TX	Zip Code 77566-5242
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Kennemer, Masters, Lunsford LLC	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1408 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Donald J. Hicks</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1025 Northeast Dr		<b>Transaction ID:</b> IE060516.0010160	
City State Zip Code Jefferson City MO 65109-2579	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Missouri Broadcasters Association	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Daniel J. Spiegel</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address PO Box 398078 7104 Valley View Rd		<b>Transaction ID:</b> IE060516.0010161	
City State Zip Code Minneapolis MN 55439-1654	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Daniel J Spiegel Atty. at Law	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ronald E. Bennett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 2514 W Colorado Ave Ste 207		<b>Transaction ID:</b> IE060516.0010162	
City State Zip Code Colorado Springs CO 80904-3074	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lincoln Financial Advisor	Occupation Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1409 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Ralph L. Crisp		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 188 Main St		<b>Transaction ID:</b> IE060516.0010167
City State Zip Code Andrews NC 28901-9249	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ralph L. Crisp Realty LLC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Leroy M. Lopez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 3333 Camino Del Rio S Ste 200		<b>Transaction ID:</b> IE060516.0010168
City State Zip Code San Diego CA 92108-3837	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Pension & Insurance Agency	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Dallas H. Stanfield		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 13960 Stringfellow Rd		<b>Transaction ID:</b> IE060516.0010169
City State Zip Code Bokeelia FL 33922-2312	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Stanfield's Services & Sales	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1410 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William T. Kyle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 12995 Sheridan Blvd Ste 201		<b>Transaction ID:</b> IE060516.0010171	
City Broomfield	State CO	Zip Code 80020-1489	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kyle Insurance	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. George W. Cooley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 6150 Eldorado Pkwy Ste 160		<b>Transaction ID:</b> IE060516.0010173	
City McKinney	State TX	Zip Code 75070-5721	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cymcor Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Yash Singh		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 3014 N Studebaker Rd		<b>Transaction ID:</b> IE060517.0010005	
City Long Beach	State CA	Zip Code 90808-4259	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Spring Union 76	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1411 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael A. Alvarez, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 29125 Avenue Paine		<b>Transaction ID:</b> IE060517.0010006	
City State Zip Code Santa Clarita CA 91355-5403	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Deluxe Media Mgmt. Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John P. Hart		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 3091 W Galbraith Rd		<b>Transaction ID:</b> IE060517.0010007	
City State Zip Code Cincinnati OH 45239-4285	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SelectionMgmt	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Vicki Whelan		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 3707 Barry Dr		<b>Transaction ID:</b> IE060517.0010010	
City State Zip Code Marshall TX 75672-4601	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fant Petroleum LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1412 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Zaw Oo</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 3180 41st St 1st Fl		<b>Transaction ID:</b> IE060517.0010013	
City State Zip Code Long Island City NY 11103-3902	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Steinway Medical Associates	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Alejandro Rosado, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 1525 Oregon Pike Ste 1401		<b>Transaction ID:</b> IE060517.0010016	
City State Zip Code Lancaster PA 17601-4376	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer 12; 34 Microtechnologies Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas J. Gallagher</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 11710 Plaza America Dr Ste 1200		<b>Transaction ID:</b> IE060517.0010018	
City State Zip Code Reston VA 20190-4770	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Stg. Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1413 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Joy T. Estes

Mailing Address 8111 E Thomas Rd Ste 110

City State Zip Code  
Scottsdale AZ 85251-5876

FEC ID number of contributing federal political committee. **C**

Name of Employer Joy Estes Agency      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

**Transaction ID:** IE060517.0010020

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
B. Holland

Mailing Address PO Box 1172

City State Zip Code  
Gadsden AL 35902-1172

FEC ID number of contributing federal political committee. **C**

Name of Employer Etowah Rehabilitation Services      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

**Transaction ID:** IE060517.0010021

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael P. Nelson

Mailing Address 431 W Chestnut St

City State Zip Code  
Denison TX 75020-3112

FEC ID number of contributing federal political committee. **C**

Name of Employer Logic Wireless Inc.      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

**Transaction ID:** IE060517.0010022

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1414 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert L. Folts		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2006	
Mailing Address 525 Goldengate St		<b>Transaction ID:</b> IE060517.0010023	
City State Zip Code Lake Orion MI 48362-3413	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Manufacturing & Industrial Technology	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ed Kaplan		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2006	
Mailing Address 40 Park Ave		<b>Transaction ID:</b> IE060517.0010026	
City State Zip Code Newton MA 02458-2636	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer 55 Union Street Trust	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Irving Singer		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2006	
Mailing Address 54 Main St Fl 3		<b>Transaction ID:</b> IE060517.0010033	
City State Zip Code Hempstead NY 11550-4051	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Irving Singer PC	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1415 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Carlos F. Suarez</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 2600 S Douglas Rd		<b>Transaction ID:</b> IE060517.0010035	
City Coral Gables	State FL	Zip Code 33134-6127	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer New England Financial-Miami	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jim Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 1853 Northcross PI S		<b>Transaction ID:</b> IE060517.0010038	
City Collierville	State TN	Zip Code 38017-9765	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Complete Scale Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Sandra Tristan</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 58 Walnut St		<b>Transaction ID:</b> IE060517.0010039	
City Milton	State PA	Zip Code 17847-1218	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Milton Developmental Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1416 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Lana Johnsonjohnston

Mailing Address 120 S Broadway Ave  
Suite109

City State Zip Code  
Tyler TX 75702-7206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lana Johnson-Johnston, At-ty. Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010040

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth E. Radford

Mailing Address 1503 Cottontown Rd

City State Zip Code  
Strasburg VA 22657-4220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kickin Asphalt Paving & Sealing Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010042

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Maria M. Calix

Mailing Address 1311 W 130th St

City State Zip Code  
Gardena CA 90247-1525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
M & F Custom Cabinets Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010043

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1417 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
M. Richardson

Mailing Address 4419 Bainbridge Blvd

City State Zip Code  
Chesapeake VA 23320-6301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Oil Transport Inc. CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2006

**Transaction ID:** IE060517.0010044

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Christine Wolk

Mailing Address 35 Wisconsin St

City State Zip Code  
Oshkosh WI 54901-3566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wolk Christine Law Office of Lawyer

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2006

**Transaction ID:** IE060517.0010045

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James C. Counts

Mailing Address 3850 E 44th St

City State Zip Code  
Tucson AZ 85713-5472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nimbus Brewing Co. LLC Partner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2006

**Transaction ID:** IE060517.0010046

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 700.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1418 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. David J. Blair</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 7820 Innovation Blvd Ste 230		<b>Transaction ID: IE060517.0010047</b>	
City State Zip Code Indianapolis IN 46278-2728	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medical Care & Outcomes LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Jeanne Martin</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 2454 Chico Ave		<b>Transaction ID: IE060517.0010050</b>	
City State Zip Code South El Monte CA 91733-1613	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AmEx Die Cutting Service Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Theodora Mallick</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 10776 Wilshire Blvd		<b>Transaction ID: IE060517.0010054</b>	
City State Zip Code Los Angeles CA 90024-4494	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Century Wilshire Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1420 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Dwight N. Ball		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2006	
Mailing Address 104 Courthouse Sq		Transaction ID: IE060517.0010061	
City Oxford	State MS	Zip Code 38655-3915	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Law Offices of Dwight N. Ball	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William L. Anthony, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2006	
Mailing Address 1000 Marsh Rd		Transaction ID: IE060517.0010062	
City Menlo Park	State CA	Zip Code 94025-1015	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Warrick Herrington Sutcliffe	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John E. Barfield		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2006	
Mailing Address 3110 Belvedere Dr		Transaction ID: IE060517.0010063	
City Columbia	State SC	Zip Code 29204-2833	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Quality Health	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1421 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gary Gussel		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 120		Transaction ID: IE060517.0010064	
City Wisconsin Dells	State WI	Amount of Each Receipt this Period 500.00	
Zip Code 53965-0120		FEC ID number of contributing federal political committee. C	
Name of Employer Travel Mart Inc.	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. G. Umakanthan		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 3965 Okemos Rd Ste B2		Transaction ID: IE060517.0010065	
City Okemos	State MI	Amount of Each Receipt this Period 500.00	
Zip Code 48864-4206		FEC ID number of contributing federal political committee. C	
Name of Employer Symbiosis Intl.	Occupation President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) <b>C.</b> Valdas Stankevicius		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 19 Cardinal Rd Ste A1		Transaction ID: IE060517.0010066	
City Hilton Head	State SC	Amount of Each Receipt this Period 500.00	
Zip Code 29926-3776		FEC ID number of contributing federal political committee. C	
Name of Employer Euro Construction Inc.	Occupation President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1422 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ronald L. Pletsch

Mailing Address 230 Lasalle St

City State Zip Code  
Tonica IL 61370

FEC ID number of contributing federal political committee. **C**

Name of Employer Illini State Bank Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010067

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Hensley R. Lee

Mailing Address 5461 NW Highway 70

City State Zip Code  
Arcadia FL 34266-2304

FEC ID number of contributing federal political committee. **C**

Name of Employer HRL Contracting Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010068

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Paul Bruno

Mailing Address 608 Longmeadow Cir

City State Zip Code  
Longwood FL 32779-2632

FEC ID number of contributing federal political committee. **C**

Name of Employer Refocus Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010069

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1423 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jason R. Henderson		Date of Receipt MM / DD / YYYY 05 / 17 / 2006
Mailing Address 225 W Jackson St		<b>Transaction ID:</b> IE060517.0010070
City Tipton	State IN	Zip Code 46072-2032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Henderson Group Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Cecilia Deleonsobier		Date of Receipt MM / DD / YYYY 05 / 17 / 2006
Mailing Address 7049 Arctic Blvd		<b>Transaction ID:</b> IE060517.0010074
City Anchorage	State AK	Zip Code 99518-2149
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer C Care Services LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Brian Denning		Date of Receipt MM / DD / YYYY 05 / 17 / 2006
Mailing Address 405 Ashford Cir		<b>Transaction ID:</b> IE060517.0010076
City Lagrange	State GA	Zip Code 30240-8898
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Wireless Hometown LLC	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1424 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert L. Foote		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 10961 Burnt Mill Rd		<b>Transaction ID:</b> IE060517.0010077	
City Jacksonville	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 32256-4654		Transaction ID: IE060517.0010077	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Alliance	Occupation Chairman	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David L. Vick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 3151 Executive Way		<b>Transaction ID:</b> IE060517.0010078	
City Miramar	State FL	Amount of Each Receipt this Period 700.00	
Zip Code 33025-3953		Transaction ID: IE060517.0010078	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00	
Name of Employer Elite. Aerospace Inc.	Occupation President	Amount of Each Receipt this Period 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	Amount of Each Receipt this Period 700.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Scott T. Miller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 3100 Smoketree Ct Ste 1002		<b>Transaction ID:</b> IE060517.0010080	
City Raleigh	State NC	Amount of Each Receipt this Period 500.00	
Zip Code 27604-1050		Transaction ID: IE060517.0010080	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer The Householder Group	Occupation President	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1700.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1425 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Cynthia J. Greaves

Mailing Address 17614 Tam O Shanter Dr

City State Zip Code  
Poway CA 92064-1331

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cinta Appraisals Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

Transaction ID: IE060517.0010082

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sandra L. Andrews

Mailing Address PO Box 33051  
Ste 425

City State Zip Code  
Phoenix AZ 85067-3051

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Caregivers of Arizona President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

Transaction ID: IE060517.0010083

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Diane J. Barry

Mailing Address 22 Bungay Rd

City State Zip Code  
North Attleboro MA 02760-4713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Corporate Realty Ltd. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

Transaction ID: IE060517.0010084

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 750.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1426 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Virginia C. Tate

Mailing Address 1405 W Walnut St

City State Zip Code  
Rogers AR 72756-3317

FEC ID number of contributing federal political committee. **C**

Name of Employer Colene's Elite. Hair Fash-ions  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2006

Transaction ID: IE060517.0010085

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Tom Combs

Mailing Address 514 Main St

City State Zip Code  
Golden City MO 64748

FEC ID number of contributing federal political committee. **C**

Name of Employer Tom Combs  
Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2006

Transaction ID: IE060517.0010086

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Karen O'Connor

Mailing Address 4050 Broadway St Ste 201

City State Zip Code  
Kansas City MO 64111-2611

FEC ID number of contributing federal political committee. **C**

Name of Employer Intermark Inc.  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2006

Transaction ID: IE060517.0010092

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1427 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Cynthia Charles

Mailing Address 92-545 Kokole Pl

City State Zip Code  
Kapolei HI 96707-1047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
C CS. Hair Repair Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010094

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Joanne S. Rocks

Mailing Address 6200 E Canyon Rim Rd

City State Zip Code  
Anaheim CA 92807-4317

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Joanne S Rocks, Atty. Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010095

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Erol Baycora

Mailing Address 6007A Lenox Ave

City State Zip Code  
Nashville TN 37209-4415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Erol Autobahn Repairs Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010096

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1428 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Brian Devery</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 1981 Marcus Ave Ste C127		<b>Transaction ID:</b> IE060517.0010098	
City State Zip Code New Hyde Park NY 11042-1032	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Devery & Devery Law Offices PLC.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Pamela G. Brubaker</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 121 Executive Ctr Dr Ste 138		<b>Transaction ID:</b> IE060517.0010100	
City State Zip Code Columbia SC 29210-8492	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Asset Preservation Specialists	Occupation Financial Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Gina R. Walberg</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 108 Barcliff Ter		<b>Transaction ID:</b> IE060517.0010102	
City State Zip Code Cary NC 27511-8900	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Panel Doctor Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1429 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Andrew N. Romanyk		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 3308 Preston Rd Ste 350-164 Ste 350-1		<b>Transaction ID:</b> IE060517.0010104
City State Zip Code Plano TX 75093-7453	Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Romanyk Consulting Corp.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Daniel Gutierrez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 3202 E Main St		<b>Transaction ID:</b> IE060517.0010105
City State Zip Code Grand Prairie TX 75050-4759	Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Gutierrez Fencing	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Sandra H. Drysdale		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 45 Perry St		<b>Transaction ID:</b> IE060517.0010106
City State Zip Code Chester NJ 07930-2512	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Communication Service Integrators	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1430 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Rod P. Scheer

Mailing Address 12610 Kaibab Ct

City State Zip Code  
Colorado Spgs CO 80908-3254

FEC ID number of contributing federal political committee. **C**

Name of Employer Trade Land Cattle Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010107

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Catherine A. Seale

Mailing Address PO Box 878

City State Zip Code  
Evanston WY 82931-0878

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010108

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Luise Maddy

Mailing Address 2522 E Morongo Trl

City State Zip Code  
Palm Springs CA 92264-4839

FEC ID number of contributing federal political committee. **C**

Name of Employer Desert Valley Nurses Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010109

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1431 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David R. Edmundson		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 15300 E 132nd Ave		<b>Transaction ID:</b> IE060517.0010110	
City State Zip Code Brighton CO 80601-6900	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Arbor Valley Nursery	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Leland Hershey		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 17195 Beck Rd		<b>Transaction ID:</b> IE060517.0010111	
City State Zip Code Charlevoix MI 49720-9736	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Precision Pallet Llc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Daniel O. Hennigan		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 537 W Sugar Creek Rd Ste 4		<b>Transaction ID:</b> IE060517.0010112	
City State Zip Code Charlotte NC 28213-6102	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The American Dream Development Co	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1432 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Francis M. Riley</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 5383 US Highway 431		<b>Transaction ID: IE060517.0010113</b>	
City State Zip Code Albertville AL 35950-0258	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Woderland Wicker Wholesale President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Susan K. Busse Graham</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 247 Spring Creek Cir Ste. 202		<b>Transaction ID: IE060517.0010115</b>	
City State Zip Code Schaumburg IL 60173-2157	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Busse Wellness Center President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Todd W. Stephenson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 3664		<b>Transaction ID: IE060517.0010117</b>	
City State Zip Code Pawleys Island SC 29585-3664	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Arborist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1433 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Beatrice Br Borden		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 300 Hot Springs Rd Apt A28 # A28		<b>Transaction ID:</b> IE060517.0010118	
City State Zip Code Montecito CA 93108-2038	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Juta Tomberg Kurman		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 6850 Juno St		<b>Transaction ID:</b> IE060517.0010119	
City State Zip Code Flushing NY 11375-5728	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5136.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Terry Simmons		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 42824 Road 80		<b>Transaction ID:</b> IE060517.0010120	
City State Zip Code Dinuba CA 93618-8705	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Terry's Flooring Service	Occupation Contract Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1434 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard C. Newman		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 1 SW Columbia St		<b>Transaction ID:</b> IE060517.0010122	
City State Zip Code Portland OR 97258-2002	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Plywood Tropics	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Joan M. Hardenbergh		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 8805 Leeshire Ln		<b>Transaction ID:</b> IE060517.0010123	
City State Zip Code Raleigh NC 27615-6568	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Gina Hortance		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 18677 W Dixie Hwy # 106		<b>Transaction ID:</b> IE060517.0010124	
City State Zip Code Miami FL 33180-2602	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Trade Portal Of The Amerc- a's	Occupation Ibo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1435 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Joan Z. Bernard

Mailing Address 394 Lisbon St

City State Zip Code  
Lisbon ME 04250-6815

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5200.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010125

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael Bergelson

Mailing Address 1120 Avenue Of The Americas

City State Zip Code  
New York NY 10036-6700

FEC ID number of contributing federal political committee. **C**

Name of Employer Advanced Health Systems LLC Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010126

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John M. Kopas

Mailing Address 2222 Highway 10

City State Zip Code  
Mounds View MN 55112-4926

FEC ID number of contributing federal political committee. **C**

Name of Employer Abbey Carpét Of Mounds View Occupation Ceo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: IE060517.0010128

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1436 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gary L. Crum		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 120 N Public Sq		<b>Transaction ID:</b> IE060517.0010131	
City State Zip Code Angola IN 46703-1959	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer G L C Inc. Llc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Nancy S. Watkins		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 2704 Poplar Hill Ct		<b>Transaction ID:</b> IE060517.0010132	
City State Zip Code Louisville KY 40207-1171	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Donald E. Coney		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 149 SE 4th St		<b>Transaction ID:</b> IE060517.0010133	
City State Zip Code Deerfield Bch FL 33441-4766	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer ABBA Cabinet Company	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1437 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Linda G. Vega</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 6420 Richmond Ave Ste 670		<b>Transaction ID: IE060517.0010134</b>	
City State Zip Code Houston TX 77057-5922	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Vega Law Firm	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. David K. Travers</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 8284 James Madison Hwy		<b>Transaction ID: IE060517.0010135</b>	
City State Zip Code Rapidan VA 22733-2014	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Skyline Water Co. Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1550.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Mike S. Julovich</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 7098 Broadway		<b>Transaction ID: IE060517.0010136</b>	
City State Zip Code Merrillville IN 46410-3538	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Merrillville Terrace Apt.	Occupation Mngr.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1438 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Edith T. Shankle</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 230		<b>Transaction ID: IE060517.0010137</b>	
City Bloomery	State WV	Zip Code 26817-0230	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Everett J. Ryan, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 1017		<b>Transaction ID: IE060517.0010139</b>	
City Windham	State NH	Zip Code 03087-1017	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer E J R Jr. Development LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. George P. Joseph, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 2389		<b>Transaction ID: IE060517.0010140</b>	
City Windermere	State FL	Zip Code 34786-2389	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Engineering Sciences Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1439 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William E. Powers

Mailing Address 3837 Arthur Ave W

City State Zip Code  
Seaford NY 11783-1571

FEC ID number of contributing federal political committee. **C**

Name of Employer Power Metro Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2006

Transaction ID: IE060517.0010143

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Marjorie Gray

Mailing Address 4707 Upper Highwood Creek Rd

City State Zip Code  
Highwood MT 59450-8746

FEC ID number of contributing federal political committee. **C**

Name of Employer Harris Land & Cattle Co. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2006

Transaction ID: IE060517.0010144

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Angel Montes

Mailing Address 1270 N 59th Ave

City State Zip Code  
Hollywood FL 33021-5131

FEC ID number of contributing federal political committee. **C**

Name of Employer A & M Angel Painting & Roofing Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2006

Transaction ID: IE060517.0010146

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1440 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Ken Brown</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 7449 Victoria Dr		<b>Transaction ID:</b> IE060517.0010147	
City West Bloomfield	State MI	Zip Code 48322-1136	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer The Brown Food Group	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ronald D. Newman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 1376		<b>Transaction ID:</b> IE060517.0010149	
City Sumner	State WA	Zip Code 98390-0280	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Milestone Homes Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Scott Galbraith</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 5263 Agro Dr		<b>Transaction ID:</b> IE060517.0010156	
City Frederick	State MD	Zip Code 21703-7969	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer United States Tower Services Ltd.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1441 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Katherine D. Parker		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 1431 Ferry Ave		<b>Transaction ID:</b> IE060517.0010158	
City State Zip Code Camden NJ 08104-1307	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Science Pump Corp.	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David L. Van Der Griend		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address PO Box 370		<b>Transaction ID:</b> IE060517.0010159	
City State Zip Code Hayden ID 83835-0370	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unitech Composites Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. H. Mentz		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 8418 Erle Rd		<b>Transaction ID:</b> IE060517.0010163	
City State Zip Code Mechanicsville VA 23116-1500	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Environmental Equip. Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1442 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Kim Nguyen		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 3220 Industry Dr		Transaction ID: IE060517.0010166	
City State Zip Code Signal Hill CA 90755-4014	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer P T Industries Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Mr. Ryan Schmidt		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 30875 Ih 10 W		Transaction ID: IE060517.0010169	
City State Zip Code Boerne TX 78006-9252	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer R D Buie Enterprises, Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Mr. William J. Leavy		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 28 Beacon Ln		Transaction ID: IE060517.0010170	
City State Zip Code East Northport NY 11731-5101	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer United Signal Services In- c.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1443 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Cindy L. Shiflett		Date of Receipt MM / DD / YYYY 05 / 17 / 2006
Mailing Address 510 Spring St Ste 210		<b>Transaction ID:</b> IE060517.0010173
City Herndon	State VA	Zip Code 20170-5148
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer Info Systems Consortium	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Benny Avecilla		Date of Receipt MM / DD / YYYY 05 / 17 / 2006
Mailing Address 3484 SE 141st Ave		<b>Transaction ID:</b> IE060517.0010175
City Portland	State OR	Zip Code 97236-2907
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 300.00
Name of Employer Rock Trates	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Javier Rodriguez		Date of Receipt MM / DD / YYYY 05 / 17 / 2006
Mailing Address 10007 Elm Ave		<b>Transaction ID:</b> IE060517.0010176
City Fontana	State CA	Zip Code 92335-6318
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 300.00
Name of Employer J & R Fleet Services LLC	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1444 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Jack James</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address RR 3 Box 612X		<b>Transaction ID:</b> IE060517.0010178	
City Albany	State KY	Zip Code 42602-9803	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Comet Lanes Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Munir Saleh</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 4704 Trabue Rd		<b>Transaction ID:</b> IE060517.0010181	
City Columbus	State OH	Zip Code 43228-9447	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jordan Remodeling & Design LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Tim E. Gaines</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 3205 Kirby Whitten Rd # 103		<b>Transaction ID:</b> IE060517.0010188	
City Bartlett	State TN	Zip Code 38134-2853	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Shelter Insurance	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1445 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jerry Quillen

Mailing Address 617 Winmoore Way

City Modesto State CA Zip Code 95358-5753

FEC ID number of contributing federal political committee. **C**

Name of Employer Modesto Love Center Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 17 / 2006

Transaction ID: IE060517.0010193

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Gunduzhan Acar

Mailing Address 3528 Lakeview Pkwy Ste 101

City Rowlett State TX Zip Code 75088-7710

FEC ID number of contributing federal political committee. **C**

Name of Employer Tek Square Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 18 / 2006

Transaction ID: IE060518.0010001

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald Webb

Mailing Address 1045 Taylor Ave Ste 106G

City Baltimore State MD Zip Code 21286-8330

FEC ID number of contributing federal political committee. **C**

Name of Employer Webb Massage Therapy Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 18 / 2006

Transaction ID: IE060518.0010003

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1300.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1446 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Powell

Mailing Address 3511 E Race Ave

City State Zip Code  
Searcy AR 72143-6215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dominos Pizza Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: IE060518.0010008

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John F. Saddler

Mailing Address 832 Green Springs Hwy Ste 103

City State Zip Code  
Birmingham AL 35209-4918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
John F. Saddler Agencies Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: IE060518.0010013

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey Nicklus

Mailing Address 1925 Longmire Rd Ste 5

City State Zip Code  
Conroe TX 77304-4892

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Desperado Motor Racing & Motorcycles CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: IE060518.0010015

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1447 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Arsenio Alejo

Mailing Address PO Box 402

City State Zip Code  
Pelham NY 10803-0402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
A & M Mach. Parts Co. Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

**Transaction ID:** IE060518.0010016

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Christopher H. Henry

Mailing Address 114 Minnie St Ste B

City State Zip Code  
Fairbanks AK 99701-3000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Christopher H Henry DMD MSPC President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

**Transaction ID:** IE060518.0010017

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert McCain

Mailing Address 7429 Broadway St

City State Zip Code  
Kansas City MO 64114-1529

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
R. McCain Salon Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

**Transaction ID:** IE060518.0010018

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1448 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Andrew H. Wheelock</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address PO Box 337		<b>Transaction ID: IE060518.0010020</b>	
City State Zip Code New Market MD 21774-0337	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Neit Solutions LLC	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael Fanning</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 1024 E Broad St Ste 207		<b>Transaction ID: IE060518.0010029</b>	
City State Zip Code Mansfield TX 76063-7702	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Brazil Agrilogic Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Randall Saul</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 3350 Ulmerton Rd Ste 21		<b>Transaction ID: IE060518.0010031</b>	
City State Zip Code Clearwater FL 33762-3380	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Professional Air Balancing	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1449 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Sam L. Phillips</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 8453 Merrill Cir		<b>Transaction ID: IE060518.0010032</b>	
City State Zip Code Largo FL 33777-1237	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fourier Designs LLC	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Jiyoung Lee</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 1307 E Maple Rd Ste D		<b>Transaction ID: IE060518.0010036</b>	
City State Zip Code Troy MI 48083-6002	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Marilyn Steeber</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 4443 N Flowing Wells Rd		<b>Transaction ID: IE060518.0010037</b>	
City State Zip Code Tucson AZ 85705-2323	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1450 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David M. Chertcoff

Mailing Address 144 N Beverwyck Rd # 298

City State Zip Code  
Lake Hiawatha NJ 07034-1909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DMC Mgmt. Services LLC Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 18 / 2006

**Transaction ID:** IE060518.0010039

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Verne R. Hubka

Mailing Address 8262 University Ave

City State Zip Code  
La Mesa CA 91941-3821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hubka & Hubka Law Offices Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 18 / 2006

**Transaction ID:** IE060518.0010041

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Irshad Qureshi

Mailing Address 250 Mill St Ste 505

City State Zip Code  
Rochester NY 14614-1026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Qunet Group LLC President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 18 / 2006

**Transaction ID:** IE060518.0010042

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1451 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Albina Williams		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006
Mailing Address 820 15th St N		<b>Transaction ID:</b> IE060518.0010044
City State Zip Code Saint Petersburg FL 33705-1235	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Albina Manor	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Carolyn Jones		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006
Mailing Address 1585 N Highway 77		<b>Transaction ID:</b> IE060518.0010045
City State Zip Code Waxahachie TX 75165-5148	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Coldwell Banker Residential Broker	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Carlos Florez		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006
Mailing Address 8255 W 20th Ave		<b>Transaction ID:</b> IE060518.0010051
City State Zip Code Hialeah FL 33014-3247	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer American Automation Systems, I	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1452 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael C. Graham		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 3410 N Proctor St		<b>Transaction ID:</b> IE060518.0010052	
City State Zip Code Tacoma WA 98407-5543	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Terry's Office Tavern	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Avi Katz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 2450 Louisiana St		<b>Transaction ID:</b> IE060518.0010053	
City State Zip Code Houston TX 77006-2380	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Katz Coffee	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard Veit		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 330 N Main St Ste 201		<b>Transaction ID:</b> IE060518.0010058	
City State Zip Code Saint Charles MO 63301-2076	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Richard R Veit PC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1453 / 2352  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Matthew L. Schubert

Mailing Address 2400 Boston St Ste 360  
The Factory Building

City Baltimore State MD Zip Code 21224-4723

FEC ID number of contributing federal political committee. **C**

Name of Employer Social Solutions Inc. Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** IE060518.0010059

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jesse J. Medina

Mailing Address 9900 S Cage Blvd

City Pharr State TX Zip Code 78577-9721

FEC ID number of contributing federal political committee. **C**

Name of Employer Pharr Reynosa Intl. Bridge Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** IE060518.0010060

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Melinda J. Dolphin

Mailing Address 4525 Gunderson Rd

City Waterford State WI Zip Code 53185-3711

FEC ID number of contributing federal political committee. **C**

Name of Employer Personally Yours Elder Care LLC Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** IE060518.0010062

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1700.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1454 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. K. Ragunathan

Mailing Address 603 13th St NW

City State Zip Code  
Canton OH 44703-3121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
K. Ragunathan DDS Inc. Dentist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** IE060518.0010064

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Willie A. Brown, Jr.

Mailing Address 1839 Willowbrook Cir

City State Zip Code  
Flint MI 48507-1412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Babas Cornbread Dressing Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** IE060518.0010066

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steven V. Edelman

Mailing Address 1110 Camino Del Mar Ste B

City State Zip Code  
Del Mar CA 92014-2649

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Taking Control of Your Diabetes Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** IE060518.0010067

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1455 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Muhammed Cetein		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006
Mailing Address 5905 Winsome Ln		<b>Transaction ID:</b> IE060518.0010071
City State Zip Code Houston TX 77057-5610	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Institute of Interfaith Dialog	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Donald B. Gerber		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006
Mailing Address 23 W Lockwood Ave		<b>Transaction ID:</b> IE060518.0010073
City State Zip Code Saint Louis MO 63119-2931	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Gerber Funeral Chapel	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. James H. Martin		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006
Mailing Address 4615 Bee Ridge Rd		<b>Transaction ID:</b> IE060518.0010076
City State Zip Code Sarasota FL 34233-1413	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Martin Clinic	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1456 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Dave Rose</p> <p>Mailing Address 5 Greenway Apt 6</p> <p>City State Zip Code  <b>Manorville NY 11949-3410</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation                  Dave Rose Construction Owner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 18 / 2006</span></p> <p><b>Transaction ID:</b> IE060518.0010079</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
---	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. George J. Huff</p> <p>Mailing Address 11600 Electron Dr</p> <p>City State Zip Code  <b>Louisville KY 40299-3860</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation                  Advanced Turf Solutions Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 18 / 2006</span></p> <p><b>Transaction ID:</b> IE060518.0010080</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">150.00</span></p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. Phillip La Rue</p> <p>Mailing Address 841 State Route 29</p> <p>City State Zip Code  <b>Celina OH 45822-8208</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation                  Wabash Garage Inc. President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 18 / 2006</span></p> <p><b>Transaction ID:</b> IE060518.0010089</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
--	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">900.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1457 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David R. Hodges

Mailing Address 2823 Main St

City State Zip Code  
Hurricane WV 25526-1422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
A To Z Supermarket Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2006

**Transaction ID:** IE060518.0010090

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Sivalingam Sivananthan

Mailing Address 590 Territorial Dr Ste B  
Ste. B

City State Zip Code  
Bolingbrook IL 60440-4881

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Epir. Ltd. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2006

**Transaction ID:** IE060518.0010091

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rita M. Sanderson

Mailing Address 1629 NE 1st Ave

City State Zip Code  
Fort Lauderdale FL 33305-2923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2006

**Transaction ID:** IE060518.0010092

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2150.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1458 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Bettie L. MacKey

Mailing Address 108 Fatum Ln

City State Zip Code  
Hackett AR 72937-2900

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: IE060518.0010093

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David B. Vandyke

Mailing Address 9616 Indianapolis Blvd

City State Zip Code  
Highland IN 46322-2655

FEC ID number of contributing federal political committee. **C**

Name of Employer Precision Construction Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: IE060518.0010094

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Tom Cobb

Mailing Address 3996 S State Highway Pp

City State Zip Code  
Republic MO 65738-2372

FEC ID number of contributing federal political committee. **C**

Name of Employer Cobb Equip., Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: IE060518.0010095

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1459 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Nathan Becker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 350 Parnassus Ave Ste 707		<b>Transaction ID:</b> IE060518.0010096
City State Zip Code San Francisco CA 94117-3621	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Becker Nathan MD Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Marilyn Smit</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 524 W Stephenson St		<b>Transaction ID:</b> IE060518.0010098
City State Zip Code Freeport IL 61032-5003	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer M45 Mktg. Services Inc.	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Molly Courtright</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2905 Gray Fox Rd		<b>Transaction ID:</b> IE060518.0010099
City State Zip Code Monroe NC 28110-8420	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Mars Powder Coating Fabrication Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1460 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael O. Barnes		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 504 Santiago Way		<b>Transaction ID:</b> IE060518.0010100	
City State Zip Code Dayton NV 89403-9398	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Barnes Firearms	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Alice Arrieta		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 750 Terrado Plz Ste 112		<b>Transaction ID:</b> IE060518.0010102	
City State Zip Code Covina CA 91723-3411	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Financial Home Center	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Les Imada		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 17820 New London Rd		<b>Transaction ID:</b> IE060518.0010103	
City State Zip Code Monument CO 80132-8523	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ecomvergence Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1461 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Susan J. Kirkpatrick

Mailing Address 2952 Limited Ln NW Unit A

City Olympia State WA Zip Code 98502-4546

FEC ID number of contributing federal political committee. **C**

Name of Employer Kirkpatrick Law Office PL-LC Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 18 / 2006

Transaction ID: IE060518.0010104

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Frank A. Weiser

Mailing Address 3460 Wlshre Blvd Ste 903

City Los Angeles State CA Zip Code 90010-2232

FEC ID number of contributing federal political committee. **C**

Name of Employer Law Offices of Frank A Weiser Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 18 / 2006

Transaction ID: IE060518.0010106

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Becky L. Roberts

Mailing Address 361 New Leicester Hwy

City Asheville State NC Zip Code 28806-2046

FEC ID number of contributing federal political committee. **C**

Name of Employer Becky S Florist Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 18 / 2006

Transaction ID: IE060518.0010108

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1462 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David J. Beckman

Mailing Address 515 Cooper Commerce Dr

City State Zip Code  
Apopka FL 32703-5135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Digital Infrared Imaging Inc. Finance Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: IE060518.0010113

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Salvador Gomez

Mailing Address 21 Shawnee Trl

City State Zip Code  
Shamong NJ 08088-9405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
A V S Fence Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: IE060518.0010115

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Harold S. Parnes

Mailing Address 1525 Voorhies Ave

City State Zip Code  
Brooklyn NY 11235-3961

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Omega Diagnostic Imaging PC Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: IE060518.0010117

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1463 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John M. Weber		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 795 N Progress Dr		<b>Transaction ID:</b> IE060518.0010119	
City State Zip Code Saukville WI 53080-1613	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Omega Industrial Products	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Frico Corriolan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 554 NW 54th St		<b>Transaction ID:</b> IE060518.0010123	
City State Zip Code Miami FL 33127-1924	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer C & F Decorating Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert W. Guido		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 5751 Coyote Meadow Ave		<b>Transaction ID:</b> IE060518.0010125	
City State Zip Code Las Vegas NV 89131-2846	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Guido's Dairy Dist. Incorporated	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1464 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Mary Carmickle

Mailing Address 3635 14 Mile Rd

City State Zip Code  
Tekonsha MI 49092-9513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Active Propane Llc Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: IE060518.0010127

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Donald H. Wooden

Mailing Address 100 US Highway 89 S

City State Zip Code  
Alpine WY 83128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wyoming Home & Ranch Co. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: IE060518.0010129

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ronnie L. Boles

Mailing Address 5323 Surrett Dr

City State Zip Code  
High Point NC 27263-4046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Builders Fireplace & Supply CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: IE060518.0010135

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	375.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1465 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard L. Adams		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 4500 South Fwy		<b>Transaction ID:</b> IE060518.0010136	
City State Zip Code Fort Worth TX 76115-3513	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Longhorn Dodge Incorporated	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kevin M. Postel		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address PO Box 72		<b>Transaction ID:</b> IE060518.0010137	
City State Zip Code Marshfield MO 65706-0072	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Postel Maps & Atlas Co. Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. H. Leroy Minatre		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 10099 Fernwood Ave		<b>Transaction ID:</b> IE060518.0010139	
City State Zip Code Stockton CA 95212-9476	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mina-tree Signs Incorporated	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1466 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Ralph Hoepfner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 4762 N 60th St		<b>Transaction ID:</b> IE060518.0010141	
City Milwaukee	State WI	Amount of Each Receipt this Period 1250.00	
Zip Code 53218-5039		FEC ID number of contributing federal political committee. C	
Name of Employer Hoepfner Drywall	Occupation Owner	Aggregate Year-to-Date ▼ 1450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Robert C. Cyman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 3570 N Veterans Dr		<b>Transaction ID:</b> IE060518.0010142	
City Onaway	State MI	Amount of Each Receipt this Period 1250.00	
Zip Code 49765-8913		FEC ID number of contributing federal political committee. C	
Name of Employer Dr. Robert C. Cyman Do	Occupation Doctor	Aggregate Year-to-Date ▼ 1350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Jack B. Howard, MD		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 1201 Arlington St Ste F		<b>Transaction ID:</b> IE060518.0010143	
City Ada	State OK	Amount of Each Receipt this Period 250.00	
Zip Code 74820-4072		FEC ID number of contributing federal political committee. C	
Name of Employer Jack B. Howard MD LLC	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1467 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Patricia Curtis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 3018 W 1st St		<b>Transaction ID:</b> IE060518.0010145	
City Thatcher	State AZ	Zip Code 85552-5602	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Juta Tomberg Kurman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 6850 Juno St		<b>Transaction ID:</b> IE060518.0010146	
City Flushing	State NY	Zip Code 11375-5728	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5136.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Durainey Rawls		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address PO Box 8466		<b>Transaction ID:</b> IE060518.0010147	
City Nikiski	State AK	Zip Code 99635-8466	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Durainey's Crane Service Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1468 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Mary B. Dubsky		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 708 Meadow Brook Ln		<b>Transaction ID:</b> IE060518.0010148	
City Milford	State DE	Zip Code 19963-3008	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Norabelle Holmes		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 283 Ridge Ln		<b>Transaction ID:</b> IE060518.0010149	
City Murrysville	State PA	Zip Code 15668-9794	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer DOD	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3076.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John I. Lamb		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 4375 Enterprise Ave Ste B Ste B		<b>Transaction ID:</b> IE060518.0010152	
City Naples	State FL	Zip Code 34104-7010	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Southern Glass & Aluminum Corp	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1469 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Sam Boan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 14201 S Murlen Rd Ste 103		<b>Transaction ID:</b> IE060518.0010154
City Olathe State KS Zip Code 66062-1859	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Sam Boan, Accountant Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Victor Clark		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1125 E Pine Ave		<b>Transaction ID:</b> IE060518.0010157
City Meridian State ID Zip Code 83642-5955	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer A All American Homes Inc. Occupation Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Scott E. Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4450 US Highway 1		<b>Transaction ID:</b> IE060518.0010160
City Vero Beach State FL Zip Code 32967-1561	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Communications Intl. Inc. Occupation Director	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1470 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael Michrowski		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 8968 Fullbright Ave		<b>Transaction ID:</b> IE060518.0010161
City State Zip Code Chatsworth CA 91311-6123	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Utility Refrigerator	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Susan P. Johnson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address PO Box 423		<b>Transaction ID:</b> IE060518.0010169
City State Zip Code Irvington NJ 07111-0423	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer G S M Construction Corp.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Duane Deml		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1300 Caledonia St		<b>Transaction ID:</b> IE060518.0010170
City State Zip Code La Crosse WI 54603-2414	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Deml Controls Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1471 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Brian K. Dallaire</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 5335 Calle Vis		<b>Transaction ID:</b> IE060518.0010172	
City State Zip Code San Diego CA 92109-1920	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Lighthouse Clinical Development	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Thomas S. Baer</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 329 E Heritage Dr		<b>Transaction ID:</b> IE060518.0010173	
City State Zip Code Knoxville TN 37934-2752	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Baer Resources	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Walter A. Howell</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 11 Fairfax Ln		<b>Transaction ID:</b> IE060518.0010174	
City State Zip Code Hilton Head Island SC 29928-6118	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Howell Real Estate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1472 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Monte Kjos</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 2710 32nd Ave S		<b>Transaction ID: IE060518.0010183</b>	
City State Zip Code Fargo ND 58103-6170	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kjos Investments	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Cliff Klima</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 4343 N Scottsdale Rd Ste 355		<b>Transaction ID: IE060518.0010184</b>	
City State Zip Code Scottsdale AZ 85251-3349	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lifewise Health Plan Arizona	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Devendra Makkar</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 1073 Stuyvesant Ave		<b>Transaction ID: IE060518.0010191</b>	
City State Zip Code Irvington NJ 07111-1118	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Prachis Financial Mart Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1473 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Scott Newman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 1504 Kadel Dr		<b>Transaction ID:</b> IE060518.0010192	
City State Zip Code Bethlehem PA 18018-1812	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer SBN Real Estate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles John		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 27520 Hawthorne Blvd		<b>Transaction ID:</b> IE060518.0010193	
City State Zip Code Rolling Hills Esta CA 90274-3576	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Dhij Mgmt. Co.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Luther H. Aldridge		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 165 Dearsall Pl		<b>Transaction ID:</b> IE060518.0010195	
City State Zip Code Bridgeport CT 06605	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Birkridge Associates Ltd.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1474 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Nicholas J. Coco

Mailing Address 578A Kearny Ave

City State Zip Code  
Kearny NJ 07032-2715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nicholas J Coco CPA Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

**Transaction ID:** IE060518.0010196

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Hwa Colton

Mailing Address 1824 S Clack St

City State Zip Code  
Abilene TX 79605-4612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hair By Halsa Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** IE060519.0010004

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Colleen M. Williams

Mailing Address 7520 Montgomery Blvd NE

City State Zip Code  
Albuquerque NM 87109-1521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Williams Colleen DDS PC Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** IE060519.0010008

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1475 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Lorna O. Callender</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 19 / 2006	
Mailing Address 18700 N 107th Ave Ste 3		<b>Transaction ID:</b> IE060519.0010011	
City State Zip Code Sun City AZ 85373-9759	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capmer Down Home Care	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael Aragon</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 19 / 2006	
Mailing Address 2134 S 110th St		<b>Transaction ID:</b> IE060519.0010012	
City State Zip Code Milwaukee WI 53227-1114	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer On-Site Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Ruth Lopez-Novodor</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 19 / 2006	
Mailing Address 220 Mount Olive Dr		<b>Transaction ID:</b> IE060519.0010014	
City State Zip Code Bradbury CA 91010-1223	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Oncology and Imaging	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1476 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Joan Coleman

Mailing Address 25501 NW 8th Ln

City State Zip Code  
Newberry FL 32669-2538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Coleman Construction Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: IE060519.0010015

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Melissa C. Pelfrey

Mailing Address PO Box 1248

City State Zip Code  
Dallas GA 30132-0022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Association of Georgia In-c. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: IE060519.0010016

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Emo J. Pentermann

Mailing Address 8100 S Akron St Ste 313

City State Zip Code  
Centennial CO 80112-3508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bell Atm Service Inc. Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: IE060519.0010019

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1477 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Nancy J. Urquiola

Mailing Address 2301 S Huron Pkwy # 1A

City State Zip Code  
Ann Arbor MI 48104-5133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nancy Urquiola Dentist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: IE060519.0010020

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Roger D. Weiss

Mailing Address 12855 Tesson Ferry Rd

City State Zip Code  
Saint Louis MO 63128-2912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Consumer Adjustment Co. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: IE060519.0010022

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Trinidad V. Mendenhall-Sosa

Mailing Address 5847 San Felipe St  
Ste 4210

City State Zip Code  
Houston TX 77057-3011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mendenhall Consulting Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: IE060519.0010024

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1478 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Marco A. Costa

Mailing Address 240 Jackson Ave

City State Zip Code  
Hackensack NJ 07601-6711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Serra Da Estrela Food Mkt. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 19 / 2006

Transaction ID: IE060519.0010025

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Roy S. Jackson

Mailing Address 15 E 2nd St

City State Zip Code  
Edmond OK 73034-3811

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Audiology Clinic Edmond LLC Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 19 / 2006

Transaction ID: IE060519.0010026

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Nicholas C. Biase

Mailing Address 14 E 60th St Ste 501

City State Zip Code  
New York NY 10022-7140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Omabuild Corp. CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 19 / 2006

Transaction ID: IE060519.0010027

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1479 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Angela P. Raposo</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 855 Waterman Ave Ste 6		<b>Transaction ID:</b> IE060519.0010028	
City East Providence	State RI	Zip Code 02914-1700	Amount of Each Receipt this Period 700.00
FEC ID number of contributing federal political committee. C			
Name of Employer Title America Closing Services LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. William L. Dinsmore</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 31 McCarrell Rd		<b>Transaction ID:</b> IE060519.0010029	
City Hickory	State PA	Zip Code 15340-1147	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mt Pleasant Township Community	Occupation Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Blake Holleman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 4640 Fm 3021		<b>Transaction ID:</b> IE060519.0010031	
City Brownwood	State TX	Zip Code 76801-0810	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Holleman Enterprises	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1480 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Johannes W. Schwank</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 5633 Meadow Dr		<b>Transaction ID: IE060519.0010033</b>	
City State Zip Code Ann Arbor MI 48105-9368	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Schwank Consulting Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Rosemarie Gaeta</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 416 Crown Ave		<b>Transaction ID: IE060519.0010033</b>	
City State Zip Code Staten Island NY 10312-2828	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rosemarie Gaeta, LCSW	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Stephen Thomas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 151 Sale Ln		<b>Transaction ID: IE060519.0010038</b>	
City State Zip Code Red Bluff CA 96080-2909	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AAA Insurance	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1481 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Brenda Bennett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 6706 Houghton Rd		<b>Transaction ID:</b> IE060519.0010039	
City Bakersfield	State CA	Zip Code 93313-9313	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer American Pressure Washing	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Mike Parise</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 8174 Helen		<b>Transaction ID:</b> IE060519.0010041	
City Center Line	State MI	Zip Code 48015-1564	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Parteck Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Judith A. Mains</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2108 Emmorton Rd Ste 4		<b>Transaction ID:</b> IE060519.0010042	
City Bel Air	State MD	Zip Code 21015-6800	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Merle Norman Cosmetics, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1482 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Lorna Cochrane

Mailing Address 1128 Cottage Pl

City Norfolk State VA Zip Code 23503-2060

FEC ID number of contributing federal political committee. **C**

Name of Employer Axdev Global Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: IE060519.0010046

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William S. Arneson

Mailing Address PO Box 185

City Speculator State NY Zip Code 12164-0185

FEC ID number of contributing federal political committee. **C**

Name of Employer Lake Pleasant Inn Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: IE060519.0010048

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark Carolin

Mailing Address 2200 Thousand Oaks Dr

City San Antonio State TX Zip Code 78232-3910

FEC ID number of contributing federal political committee. **C**

Name of Employer Concept Wealth Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: IE060519.0010050

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1483 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Lemuel Howard		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 2716 Evans Mill Rd		<b>Transaction ID:</b> IE060519.0010052	
City Lithonia	State GA	Zip Code 30058-7417	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lem Howard Insurance Agency, Inc.	Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Dennis Nalls		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 32932 Pineview Cir		<b>Transaction ID:</b> IE060519.0010054	
City North Ridgeville	State OH	Zip Code 44039-4378	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Delna Health Enterprise	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jeffrey J. Dewit		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 3001 E Camelback Rd Ste 120		<b>Transaction ID:</b> IE060519.0010055	
City Phoenix	State AZ	Zip Code 85016-4427	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Echotrade LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1484 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Edward W. Webb		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 341 Senate St NW		<b>Transaction ID:</b> IE060519.0010056	
City State Zip Code Salem OR 97304-4653	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer West Hills Village	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Vickie L. Dethomas		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 110 Kountz Ln		<b>Transaction ID:</b> IE060519.0010058	
City State Zip Code Freeport PA 16229-1724	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Optical Systems Technology Inc.	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John Neeson		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 107 John St		<b>Transaction ID:</b> IE060519.0010061	
City State Zip Code Southport CT 06890-1466	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sirius Decisions	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1485 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Buddy Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 1201 Richardson Dr Ste 180		<b>Transaction ID:</b> IE060519.0010062
City Richardson State TX Zip Code 75080-4610	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Entaq Inc. Occupation President	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Alyce Morris-Winston		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 5470 W Washington Blvd		<b>Transaction ID:</b> IE060519.0010064
City Los Angeles State CA Zip Code 90016-1135	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Jeffrey Foundation Occupation President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Eugene F. Cheslock		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 211 Shrewsbury Ave		<b>Transaction ID:</b> IE060519.0010065
City Red Bank State NJ Zip Code 07701-1250	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Parker Family Health Clinic Occupation President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1486 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Richard Sacco</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 700 Basket Rd		<b>Transaction ID: IE060519.0010066</b>	
City State Zip Code Webster NY 14580-9724	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Radax Ins. Inc.	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Dennard R. Freeman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 24111 Ga Highway 57		<b>Transaction ID: IE060519.0010068</b>	
City State Zip Code Toomsboro GA 31090-2502	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer M & M Clays	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Benjamin F. Kimbler</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 102 Maple Ave		<b>Transaction ID: IE060519.0010069</b>	
City State Zip Code Youngstown OH 44515-2015	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Formetco Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1487 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Bruce H. Winn

Mailing Address 1823 E 17th St

City State Zip Code  
 Little Rock AR 72202-5719

FEC ID number of contributing federal political committee. **C**

Name of Employer  
 Creative Engineering Consultants

Occupation  
 President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2006

**Transaction ID:** IE060519.0010070

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
 Mrs. Dennise M. Boldt

Mailing Address 1910 Commerce St

City State Zip Code  
 Victoria TX 77901-5510

FEC ID number of contributing federal political committee. **C**

Name of Employer  
 Crossroads Home Health, Inc

Occupation  
 Owner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2006

**Transaction ID:** IE060519.0010071

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
 Mr. Michael A. Hanson

Mailing Address 3164 Minnie St

City State Zip Code  
 Grand Junction CO 81504-6391

FEC ID number of contributing federal political committee. **C**

Name of Employer  
 State Of Colorado/hanson Custom Stucco

Occupation  
 Business/ Ssoi

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2006

**Transaction ID:** IE060519.0010075

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1488 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Leyla A. Bikhazi		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 7760 Vale Dr		<b>Transaction ID:</b> IE060519.0010076	
City State Zip Code Whittier CA 90602-1918	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ted Marx		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 560 S Saylor Ave		<b>Transaction ID:</b> IE060519.0010077	
City State Zip Code Elmhurst IL 60126-3826	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Housing & Urban Development	Occupation Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Martha Hooper		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 372 SW 1st Ave		<b>Transaction ID:</b> IE060519.0010079	
City State Zip Code Ontario OR 97914-2734	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Safe Haven Flash	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1489 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles Evans

Mailing Address 2401 MacDonald Ave

City State Zip Code  
Richmond CA 94804-1822

FEC ID number of contributing federal political committee. C

Name of Employer Cj's Barbecue & Fish      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

**Transaction ID:** IE060519.0010081

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Stanley A. Gniadzowski

Mailing Address 2514 Boston Post Rd Apt 9C

City State Zip Code  
Guilford CT 06437-1339

FEC ID number of contributing federal political committee. C

Name of Employer Realty Concepts Inc.      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

**Transaction ID:** IE060519.0010083

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Robert L. Rettig

Mailing Address 8033 W Grandridge Blvd  
Ste C

City State Zip Code  
Kennewick WA 99336-7159

FEC ID number of contributing federal political committee. C

Name of Employer Rettig Chiropractic      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

**Transaction ID:** IE060519.0010088

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1500.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1490 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael E. Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 100 N Broadway Ave Ste 2900		<b>Transaction ID:</b> IE060519.0010091
City State Zip Code Oklahoma City OK 73102-8865	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Hall & Estill Law Firm	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Marvin Wilt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 109 Denson Dr		<b>Transaction ID:</b> IE060519.0010092
City State Zip Code Austin TX 78752-4148	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Bells International, Inc	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Bryan Hext		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 15008 Highway 105 E		<b>Transaction ID:</b> IE060519.0010095
City State Zip Code Plantersville TX 77363-7572	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Plantex Homes	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1491 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ron L. Schmidt

Mailing Address 43301 Division St

City State Zip Code  
Lancaster CA 93535-4647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Precision Graphics Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: IE060519.0010097

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Granville C. Dawson

Mailing Address PO Box 339

City State Zip Code  
Kilmarnock VA 22482-0339

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GC Dawson Real Estate Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: IE060519.0010099

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas W. Richey

Mailing Address 1616 S Voss Rd Ste 820

City State Zip Code  
Houston TX 77057-2639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Richey Resources Co. Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: IE060519.0010100

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1492 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Stesano A. Masi</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address <b>1 Woodland Ave</b>		<b>Transaction ID: IE060519.0010101</b>	
City State Zip Code <b>Paramus NJ 07652-3608</b>	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jerry McKenzie</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address <b>206 San Felipe St NW</b>		<b>Transaction ID: IE060519.0010103</b>	
City State Zip Code <b>Albuquerque NM 87104-1478</b>	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Christin Wolf Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Kurt A. Rupenthal</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address <b>5790 E 131st St Ste 110</b>		<b>Transaction ID: IE060519.0010104</b>	
City State Zip Code <b>Carmel IN 46033-8395</b>	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer DR. Kurt A Rupenthal, DDS LLC	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1493 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Thomas B. Wagner</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 9670 S State Road 263		<b>Transaction ID:</b> IE060519.0010105	
City State Zip Code Williamsport IN 47993-8268	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fairmount Lime Products Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Norris Starlin, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 3707 E Kiest Blvd		<b>Transaction ID:</b> IE060519.0010106	
City State Zip Code Dallas TX 75203-4121	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Norris Services Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Craig Cherry</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 3808 Mount Hayden		<b>Transaction ID:</b> IE060519.0010107	
City State Zip Code Montrose CO 81401-8129	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Independence Building Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1494 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William J. Wells		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 11 Progress Dr		<b>Transaction ID:</b> IE060519.0010109	
City State Zip Code Cromwell CT 06416-1035	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mack Fire Protection LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Frank Cheek		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 7307 Greenview Dr		<b>Transaction ID:</b> IE060519.0010114	
City State Zip Code Battle Ground IN 47920-9730	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Lh industry	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Doug Hefner		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 1233 W Shaw Ave Ste 105		<b>Transaction ID:</b> IE060519.0010117	
City State Zip Code Fresno CA 93711-3718	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Integrity Lending Group Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1495 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Dan Ferch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 3701 Executive Center Dr		Transaction ID: IE060519.0010118	
City Austin	State TX	Zip Code 78731-1644	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ferch Insurance Group	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Homer Skaggs, Jr		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 903 Edgar St		Transaction ID: IE060519.0010119	
City Evansville	State IN	Zip Code 47710-2003	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Homer Skaggs, Jr., MD	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Gerald N. Purcell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 500 W Washington Ave		Transaction ID: IE060519.0010124	
City Navasota	State TX	Zip Code 77868-2840	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer J. Youens & Company	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1496 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Butch Hamm Mailing Address 205 E 1st St City Sheffield State AL Zip Code 35660-3031 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> IE060519.0010127 Amount of Each Receipt this Period 150.00
Name of Employer Butch's Auto Repair & Towing Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jerry B. Smith Mailing Address 2350 Executive Cir City Colorado Springs State CO Zip Code 80906-4138 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> IE060519.0010130 Amount of Each Receipt this Period 300.00
Name of Employer Tranex Incorporated Occupation Ceo Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Michael W. Chatterley Mailing Address PO Box 340 City Canby State OR Zip Code 97013-0340 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> IE060519.0010131 Amount of Each Receipt this Period 150.00
Name of Employer Precision Metal Finishing, Inc Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1497 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Gustavo Marin

Mailing Address 2380 E Park Blvd  
Ste 300

City Plano State TX Zip Code 75074-5149

FEC ID number of contributing federal political committee. **C**

Name of Employer East Plano Family Clinic Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: IE060519.0010137

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Peter Wu

Mailing Address 1740 Fruitridge Rd

City Sacramento State CA Zip Code 95822-3037

FEC ID number of contributing federal political committee. **C**

Name of Employer Wu & Pen Medical Assoc. Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: IE060519.0010139

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Cesar Deleon

Mailing Address 6861 Cobia Cir

City Boynton Beach State FL Zip Code 33437-3644

FEC ID number of contributing federal political committee. **C**

Name of Employer Cesar Deleon, M.D., P. A. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: IE060519.0010140

Amount of Each Receipt this Period  
1250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1498 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Judy D. Eyles Mailing Address 210 W 2nd Ave City State Zip Code Toppenish WA 98948-1602 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> IE060519.0010141 Amount of Each Receipt this Period 2500.00
Name of Employer Occupation Alice's Country Rose Flo Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2600.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Norma Oller-Maggoc Mailing Address 4052 N Witchduck Rd City State Zip Code Virginia Beach VA 23455-5615 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> IE060519.0010142 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Norma Oller-Maggoc MD PC Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Lawrence L. Bruckner Mailing Address 1110 Locust St City State Zip Code Thomson IL 61285-8503 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> IE060519.0010143 Amount of Each Receipt this Period 350.00
Name of Employer Occupation Thomson House Villager Lo-dg. Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1499 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Berry T. Crow		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 2500 6th Ave Apt 203		<b>Transaction ID:</b> IE060519.0010144
City San Diego	State CA	Zip Code 92103-6629
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Brighton Health Alliance	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5050.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Esmail D. Hessami		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address PO Box 630		<b>Transaction ID:</b> IE060519.0010145
City Burbank	State CA	Zip Code 91503-0630
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer David E. Hessami MD	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Robert B. Nisbet		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 800 NE 15th St. ROB426		<b>Transaction ID:</b> IE060519.0010146
City Oklahoma City	State OK	Zip Code 73190-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer OU Physicians	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1500 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Christopher D. Beckett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address PO Box 300		<b>Transaction ID:</b> IE060519.0010147	
City Williamson	State WV	Zip Code 25661-0300	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Williamson Family Care Center	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Peter Wong		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 210 Executive Center Pkwy		<b>Transaction ID:</b> IE060519.0010148	
City Fredericksburg	State VA	Zip Code 22401-3107	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Gastroenterology Associates	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Mark R. Villeneuve		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 14555 Levan Rd Ste 202		<b>Transaction ID:</b> IE060519.0010149	
City Livonia	State MI	Zip Code 48154-5085	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Michigan Lung & Sleep Specialists	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1501 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Joanne Grant		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 820 E Main St		<b>Transaction ID:</b> IE060519.0010151	
City State Zip Code Salisbury MD 21804-5025	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Delmarva Collections Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Velva A. Eubanks		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 13544 Eubanks Dr		<b>Transaction ID:</b> IE060519.0010154	
City State Zip Code Dexter MO 63841-9704	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Edd Eubanks Trucking Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Janet Joy		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address PO Box 45443		<b>Transaction ID:</b> IE060519.0010155	
City State Zip Code Omaha NE 68145-0443	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Joy and Assocs Inc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1502 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Sherri Mitchell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2141 E Camelback Rd Ste 105		<b>Transaction ID: IE060519.0010156</b>	
City State Zip Code Phoenix AZ 85016-4723	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer All About People Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Sharon A. Ventrello</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 718 Washington St		<b>Transaction ID: IE060519.0010158</b>	
City State Zip Code Wenatchee WA 98801-2625	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Rose of Sharon Real Estate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Joe C. Lattanzio</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 4600 W Waco Dr		<b>Transaction ID: IE060519.0010159</b>	
City State Zip Code Waco TX 76710-7049	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer All Tune & Lube.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1503 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Aaron Moore		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 39519 Chantilly Ln		<b>Transaction ID:</b> IE060519.0010160	
City Palmdale	State CA	Zip Code 93551-1012	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Swarthy Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Dave Eshleman		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 571 Strites Rd		<b>Transaction ID:</b> IE060519.0010161	
City Harrisburg	State PA	Zip Code 17111-3903	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Blue Quartz Technologies LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David S. Palmer		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 1601 Pacific Ave		<b>Transaction ID:</b> IE060519.0010162	
City Oxnard	State CA	Zip Code 93033-4084	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer First Endeavor Paintball	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1504 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Sharon C. Richardson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 514 Front St		<b>Transaction ID: IE060519.0010166</b>	
City State Zip Code Santa Cruz CA 95060-4506	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ferrari Florist & Gifts	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. James P. Jones</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 1564 Springfield Hwy		<b>Transaction ID: IE060519.0010167</b>	
City State Zip Code Goodlettsville TN 37072-4217	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Intl. Cleaning Contractors	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Shiu Narayan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 94-688 Farrington Hwy		<b>Transaction ID: IE060519.0010168</b>	
City State Zip Code Waipahu HI 96797-3157	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Lumber Supply Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1505 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Rodney E. Bracy

Mailing Address 11805 Davis Rd

City State Zip Code  
Middleville MI 49333-8654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mid-tech Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** IE060519.0010169

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Linda M. Keeble

Mailing Address PO Box 531212

City State Zip Code  
Birmingham AL 35253-1212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wrestle Inc President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** IE060519.0010170

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steve Holly

Mailing Address 17814 McKinley Rd

City State Zip Code  
Okmulgee OK 74447-8682

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mid-Oaks Services Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

**Transaction ID:** IE060519.0010171

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1506 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Wenwei Jia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 455 Atlantic Ave		<b>Transaction ID:</b> IE060519.0010173	
City State Zip Code Long Beach CA 90802-2536	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A Beautiful California Florist	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Brad Pannell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 146 S Industrial Rd		<b>Transaction ID:</b> IE060519.0010175	
City State Zip Code Tupelo MS 38801-4620	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer GO Wireless	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. I. Ramos		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 1824 E 1st St		<b>Transaction ID:</b> IE060519.0010178	
City State Zip Code Los Angeles CA 90033-3411	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Printing Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1507 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas J. Roberts

Mailing Address 2851 S Pike Ave Ste D

City Allentown State PA Zip Code 18103-7652

FEC ID number of contributing federal political committee. **C**

Name of Employer Harbor Lights Financial Group Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2006

Transaction ID: IE060519.0010180

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Martin Vulaj

Mailing Address 241 S Van Brunt St

City Englewood State NJ Zip Code 07631-4009

FEC ID number of contributing federal political committee. **C**

Name of Employer Mobile Innovations Inc. Occupation Chairman

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2006

Transaction ID: IE060519.0010181

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Larry Wepler

Mailing Address PO Box 191

City Liberty State MO Zip Code 64069-0191

FEC ID number of contributing federal political committee. **C**

Name of Employer Trophy Properties Inc. Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2006

Transaction ID: IE060519.0010182

Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1508 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Brent Arp		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 102 W Otis St		<b>Transaction ID:</b> IE060519.0010183	
City Walcott	State IA	Amount of Each Receipt this Period 300.00	
Zip Code 52773			
FEC ID number of contributing federal political committee. C			
Name of Employer Arp Insurance Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Joseph Castranova, III		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 434 SW 12th Ave Ste 401		<b>Transaction ID:</b> IE060519.0010187	
City Miami	State FL	Amount of Each Receipt this Period 350.00	
Zip Code 33130-2434			
FEC ID number of contributing federal political committee. C			
Name of Employer South Florida Billing Mgmt.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Alan M. Gibbs		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 168 Main St		<b>Transaction ID:</b> IE060519.0010188	
City Huntington	State NY	Amount of Each Receipt this Period 300.00	
Zip Code 11743-6919			
FEC ID number of contributing federal political committee. C			
Name of Employer Alan M Gibbs DDS PC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1509 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Fritz Clairvil		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 703 Flatbush Ave		<b>Transaction ID:</b> IE060519.0010189	
City State Zip Code Brooklyn NY 11225-6006	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Vest Net Capital LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Leonard Schramm		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 9940 N 79th PI		<b>Transaction ID:</b> IE060519.0010193	
City State Zip Code Scottsdale AZ 85258-6502	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jolen Consultants Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Todd A. Koca		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 10955 Lowell Ave Ste 600		<b>Transaction ID:</b> IE060519.0010196	
City State Zip Code Shawnee Mission KS 66210-2363	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Symmedrx LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1510 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark A. Rook

Mailing Address 10005 China Garden Cv

City State Zip Code  
Austin TX 78730-3549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MAR. Global Services Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: IE060519.0010199

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Annalisa Liuzzo

Mailing Address 1 Penn Plz

City State Zip Code  
New York NY 10119-0002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Liuzzo & Associates PC Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010004

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ron D. Hanson

Mailing Address 14390 Clay Terrace Blvd Ste 261

City State Zip Code  
Carmel IN 46032-3668

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hanson & Shyder Financial Advisors Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010005

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1511 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Chris M. McDaniel

Mailing Address 23425 N Scottsdale Rd

City State Zip Code  
Scottsdale AZ 85255-3469

FEC ID number of contributing federal political committee. **C**

Name of Employer  
McDaniel Family Chiropractic

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010006

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Stephen M. Schuchman

Mailing Address 3489 Castro Valley Blvd

City State Zip Code  
Castro Valley CA 94546-5603

FEC ID number of contributing federal political committee. **C**

Name of Employer  
S.M. Schuchman Inc.

Occupation  
Veterinarian

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010007

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark W. Geist

Mailing Address 306 W 13th St

City State Zip Code  
Pueblo CO 81003-2702

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Dynamic Research Solutions Inc.

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010009

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1512 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Kenneth Henry</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2828 N Pine Hills Rd		<b>Transaction ID: IE060522.0010012</b>	
City State Zip Code Orlando FL 32808-3540	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Royal Pine LLC Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Annette Smedley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 3006 Glade St		<b>Transaction ID: IE060522.0010013</b>	
City State Zip Code Muskegon MI 49444-2705	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Annette Smedley Atty. at Law Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Keith Hall</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 7200 E Dry Creek Rd Ste F204		<b>Transaction ID: IE060522.0010014</b>	
City State Zip Code Centennial CO 80112-2572	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Broadband Plus LLC Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1513 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lisa Wright

Mailing Address 4699 N State Road 7  
Ste A1

City State Zip Code  
Lauderdale Lakes FL 33319-5870

FEC ID number of contributing federal political committee. **C**

Name of Employer Foreclosure Solution Specialists  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010015

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Diana L. Day

Mailing Address 514 Park Center Ave

City State Zip Code  
Nashville TN 37205-3430

FEC ID number of contributing federal political committee. **C**

Name of Employer Client Care Solutions  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010016

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Larry Webb

Mailing Address 8910 Purdue Rd Ste 220

City State Zip Code  
Indianapolis IN 46268-1191

FEC ID number of contributing federal political committee. **C**

Name of Employer Larry G Webb  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010018

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1514 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Prof. Theresa A. Schmidt Mspt</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 1480		<b>Transaction ID: IE060522.0010020</b>	
City State Zip Code Massapequa NY 11758-0908	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Flex Physical Therapy	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Murray Z. Malinoski</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 717 S Health Pkwy		<b>Transaction ID: IE060522.0010021</b>	
City State Zip Code Three Rivers MI 49093-8352	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Malinoski & Associates DDS PC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Timothy A. Baker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1104 Kossuth Ave		<b>Transaction ID: IE060522.0010025</b>	
City State Zip Code Utica NY 13501-3214	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer STS Precision Testing	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1515 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark B. MacLean

Mailing Address 2033 Flesher Ave

City Jacksonville State FL Zip Code 32207-3516

FEC ID number of contributing federal political committee. **C**

Name of Employer Mark B MacLean Atty. Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010026

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Alina Mogilevsky

Mailing Address 2847 Pfingsten Rd Ste G

City Glenview State IL Zip Code 60026-1164

FEC ID number of contributing federal political committee. **C**

Name of Employer E & E Electronics Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010031

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mario Hernandez

Mailing Address 1460 Industrial Blvd

City Eagle Pass State TX Zip Code 78852-5240

FEC ID number of contributing federal political committee. **C**

Name of Employer Carlos Kim Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010032

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1516 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Paul Yee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 8303 Southwest Fwy Ste 760		<b>Transaction ID: IE060522.0010033</b>	
City State Zip Code Houston TX 77074-1621	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Paul Yee Business Insurance	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. James Lamantia</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 4021 NE 15th Ter		<b>Transaction ID: IE060522.0010034</b>	
City State Zip Code Pompano Beach FL 33064-6001	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer J & K Adjusting Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Lyn Jacimore</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 400 E C St		<b>Transaction ID: IE060522.0010035</b>	
City State Zip Code Russellville AR 72801-4133	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bright Beginnings Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1517 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mike Hetherly

Mailing Address 4301 Cat Hollow Dr

City State Zip Code  
Austin TX 78731-2005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Health Co. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** IE060522.0010036

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Patsy A. Jakubas

Mailing Address 1207 Aquia Dr

City State Zip Code  
Stafford VA 22554-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sit. Systems Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** IE060522.0010037

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Dianne Weaver

Mailing Address 10710 Roy Dr

City State Zip Code  
Greenville MI 48838-9105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Our Place Cares LLC Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

**Transaction ID:** IE060522.0010039

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1518 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Walter Drzewiecki, Jr.  
 Mailing Address 403 W Mitchell St  
 City State Zip Code  
 Gaylord MI 49735-1825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Gaylord Feed & Grain Inc Owner  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6  
**Transaction ID:** IE060522.0010040  
 Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Wuping Ma  
 Mailing Address 1700 S Mount Prospect Rd  
 City State Zip Code  
 Des Plaines IL 60018-1804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Synchem Inc. CEO  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6  
**Transaction ID:** IE060522.0010041  
 Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jose Cuevas, Jr.  
 Mailing Address PO Box 50607  
 PO Box 50607  
 City State Zip Code  
 Midland TX 79710-0607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Jumburrito Inc. Owner  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6  
**Transaction ID:** IE060522.0010043  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 900.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1519 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Frank R. Gebhart		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 4110 York Rd		<b>Transaction ID:</b> IE060522.0010044
City State Zip Code New Oxford PA 17350-9115	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Frank Gebhart Concrete Co- nstruction In	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Michael A. Pellini		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 110 Plains Rd		<b>Transaction ID:</b> IE060522.0010046
City State Zip Code Essex CT 06426-1501	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Underwater Construction Corp.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. William F. Forest		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1002 Ash St		<b>Transaction ID:</b> IE060522.0010047
City State Zip Code Georgetown TX 78626-5926	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Forest Surveying & Mapping Co.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1520 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Ed Blinn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 628 E 3rd St		<b>Transaction ID:</b> IE060522.0010049
City Marion State IN Zip Code 46952-4076	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Blinn Enterprise Occupation Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Miss Natalie Digioia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1232 W Indiantown Rd		<b>Transaction ID:</b> IE060522.0010056
City Jupiter State FL Zip Code 33458-3905	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Aphrodite Full Service Salon & Spa Occupation Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Albert Catanach		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1308 Apache Ave		<b>Transaction ID:</b> IE060522.0010058
City Santa Fe State NM Zip Code 87505-3212	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Computer Network Service Professional Occupation Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1521 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Paul T. Branda</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 821 Foster Ave		<b>Transaction ID: IE060522.0010061</b>	
City State Zip Code Brooklyn NY 11230-1358	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Owner	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael Kappler</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 13949 Willow Wood Dr		<b>Transaction ID: IE060522.0010062</b>	
City State Zip Code Broomfield CO 80020-6178	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Kappler Mechanical & Electrical Occupation Owner	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Dr. Neil A. Thoman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1250 E Ridgewood Ave		<b>Transaction ID: IE060522.0010063</b>	
City State Zip Code Ridgewood NJ 07450-3956	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Neil A Thoman DMD Occupation Owner	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1522 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joseph A. Mule		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 201 Moreland Rd Ste 7		<b>Transaction ID:</b> IE060522.0010064	
City State Zip Code Hauppauge NY 11788-3922	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Joseph A. Mule'pc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Alan K. Yeary		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 741 Cannery Hollow Rd		<b>Transaction ID:</b> IE060522.0010065	
City State Zip Code Speedwell TN 37870-7313	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Yeary's Custom Building & Home Inspect	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Maria I. Herrera		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2502 NE Jacksonville Rd Ste 102		<b>Transaction ID:</b> IE060522.0010071	
City State Zip Code Ocala FL 34470-3762	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Flowers By Squires	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1523 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Chris Braun		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2442 E End Rd		<b>Transaction ID:</b> IE060522.0010072	
City Shippenville	State PA	Zip Code 16254-1318	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Himes Sales & Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. John Speak		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6399 S Tex Pt		<b>Transaction ID:</b> IE060522.0010073	
City Homosassa	State FL	Zip Code 34448-5923	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C			
Name of Employer Coastal Hurricane Shutters Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Darryl L. Mobley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2303 RR 620 S Ste 135-345		<b>Transaction ID:</b> IE060522.0010075	
City Lakeway	State TX	Zip Code 78734-6219	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Family Digest Media Group	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1524 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Frank M. Romeo

Mailing Address 745 Titus Ave

City State Zip Code  
Rochester NY 14617-3928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Romeo Land Development LLC Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010076

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Gregory F. Coffey

Mailing Address 124 Merrick Ave

City State Zip Code  
Merrick NY 11566-3434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Gregory Coffey Ph.D. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010079

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Benson Johnson

Mailing Address 2727 2nd Ave  
Ste 329

City State Zip Code  
Detroit MI 48201-2658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
B & D Supplies President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010080

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1525 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Kimball D. Wells</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 93629		<b>Transaction ID: IE060522.0010082</b>	
City State Zip Code Grapevine TX 76092-0115	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mesco Metal Buildings	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ron L. Kastein</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 503		<b>Transaction ID: IE060522.0010083</b>	
City State Zip Code Delavan WI 53115-0503	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Barker Lumber Supply Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Larry L. Cochran</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2567 Dug Gap Rd SW		<b>Transaction ID: IE060522.0010084</b>	
City State Zip Code Dalton GA 30720-9219	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Real Estate Assoc Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	625.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1526 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Anthony Mele		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6 Christine Dr		<b>Transaction ID:</b> IE060522.0010085	
City State Zip Code Chestnut Rdg NY 10977-6801	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AMI Associates Security Consultants	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ralph W. Sexton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 2187		<b>Transaction ID:</b> IE060522.0010086	
City State Zip Code Vero Beach FL 32961-2187	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sexton Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harry D. Patel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6065 Hillcroft St Ste 502		<b>Transaction ID:</b> IE060522.0010087	
City State Zip Code Houston TX 77081-1197	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Financial Management Tax Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	875.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1527 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael L. Steenbergen

Mailing Address 1632 S 56th St

City State Zip Code  
Springdale AR 72762-0718

FEC ID number of contributing federal political committee. **C**

Name of Employer All Around Landscaping Inc      Occupation President

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3800.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010088

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Darren Elenburg

Mailing Address 5401 N Portland Ave Ste 390

City State Zip Code  
Oklahoma City OK 73112-2082

FEC ID number of contributing federal political committee. **C**

Name of Employer Podiatric Associates      Occupation Partner

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010089

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Pat Thomas

Mailing Address 295 Main St  
Rm 914

City State Zip Code  
Buffalo NY 14203-2509

FEC ID number of contributing federal political committee. **C**

Name of Employer L & P Group      Occupation Mgr

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010090

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1528 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Jasprit Singh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 131 Industrial Dr		<b>Transaction ID:</b> IE060522.0010091	
City State Zip Code Grand Island NY 14072-1218	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer JMS Process Contracting Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Thomas A. Shealy</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6036 Trier Rd		<b>Transaction ID:</b> IE060522.0010092	
City State Zip Code Fort Wayne IN 46815-5337	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Thomas Shealy Md	Occupation Optician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ronald A. Knight</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 12598 Central Ave Ste 216		<b>Transaction ID:</b> IE060522.0010093	
City State Zip Code Chino CA 91710-3530	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ronald A Knight And Associates Incorpo	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1529 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Charlotte Moore

Mailing Address 711 Anderson St

City Augusta State WI Zip Code 54722-9002

FEC ID number of contributing federal political committee. **C**

Name of Employer Moore Genuine Care Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010096

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Garth C. Myers

Mailing Address PO Box 349

City Ganado State TX Zip Code 77962-0349

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010098

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Milton R. Joseph

Mailing Address 19 Kent St

City New City State NY Zip Code 10956-2934

FEC ID number of contributing federal political committee. **C**

Name of Employer Joseph Consulting Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010099

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1530 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Barnes

Mailing Address 1358 N Stewart Ave

City State Zip Code  
Springfield MO 65802-2239

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DITA-ERB President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010101

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Nishwa P. Singh

Mailing Address 12314 Jamaica Ave

City State Zip Code  
Jamaica NY 11418-2639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Liberty Hills Realty Inc. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010102

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Margaret M. Collignon

Mailing Address 113 Seaboard Ln

City State Zip Code  
Franklin TN 37067-8281

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Group Insurance Consultants Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010105

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1531 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Jo A. Gasper

Mailing Address 4103 Paddington Ln

City State Zip Code  
Colleyville TX 76034-3757

FEC ID number of contributing federal political committee. **C**

Name of Employer Franklin Park Associates Ltd. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010106

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Linda A. Wolfe-Dawidjan

Mailing Address 327 1/2 W 2nd Ave

City State Zip Code  
Spokane WA 99201-4309

FEC ID number of contributing federal political committee. **C**

Name of Employer LWD Enterprises Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010107

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael Lee

Mailing Address 4403 Manchaca Rd

City State Zip Code  
Austin TX 78745-1680

FEC ID number of contributing federal political committee. **C**

Name of Employer Mlee Insurance Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010109

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 550.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1532 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Stan Leland

Mailing Address 4060 W 50 N

City State Zip Code  
Wabash IN 46992-8640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Brodbeck Seed Incorporated President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010110

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Catherine Sonaglia

Mailing Address 4801 N Federal Hwy Ste 202

City State Zip Code  
Fort Lauderdale FL 33308-4618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Anti-Aging Alternative Aging & Rejuven Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010114

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Norris, Jr.

Mailing Address 1000 Corporate Pointe

City State Zip Code  
Culver City CA 90230-7610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Century Villages at Cabillo President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010116

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1533 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Ivan Salaberrios</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 7604 Slate Ridge Blvd		<b>Transaction ID:</b> IE060522.0010120	
City State Zip Code Reynoldsburg OH 43068-8157	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Aim Technical Consultants President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Stephanie Westphal</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 8876 Gulf Fwy Ste 540		<b>Transaction ID:</b> IE060522.0010121	
City State Zip Code Houston TX 77017-6544	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Westex Security Services Inc. President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Evelyn A. Soria</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 270 W Badillo St		<b>Transaction ID:</b> IE060522.0010122	
City State Zip Code Covina CA 91723-1906	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation E R A Home Health Services Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1534 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John D. Stratton

Mailing Address 801 Asbury Ave Ste 208  
Ste 208

City State Zip Code  
Ocean City NJ 08226-3625

FEC ID number of contributing federal political committee. **C**

Name of Employer American Benefit Svc. Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010125

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Pete Tooley

Mailing Address 8111 S County Rd.  
300 W

City State Zip Code  
Muncie IN 47302

FEC ID number of contributing federal political committee. **C**

Name of Employer Pete Tooley Corp. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010126

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Darrin Cordova

Mailing Address 20 R J Aragon Rd

City State Zip Code  
Los Lunas NM 87031-7193

FEC ID number of contributing federal political committee. **C**

Name of Employer Valliant Builders Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010127

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1535 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Helen H. Brandon

Mailing Address 810 Kirkwood Ave

City Murfreesboro State TN Zip Code 37130-4904

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010128

Amount of Each Receipt this Period  
 150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Salah Zindani

Mailing Address 770 Morris Park Ave

City Bronx State NY Zip Code 10462-3619

FEC ID number of contributing federal political committee. **C**

Name of Employer Aza Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010129

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Carl Burr

Mailing Address RR 1 Box 1102

City Patton State MO Zip Code 63662-9703

FEC ID number of contributing federal political committee. **C**

Name of Employer Burr Auto Repair & Body Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010130

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1536 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Joseph A. Chambrot</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address <b>950 NW 22nd Ave</b>		<b>Transaction ID: IE060522.0010133</b>	
City <b>Miami</b>	State <b>FL</b>	Zip Code <b>33125-3343</b>	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Law Offices of Joseph A Chambrot</b>	Occupation <b>Lawyer</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Lynn Czajkowski</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address <b>2230 Highway 44 W</b>		<b>Transaction ID: IE060522.0010135</b>	
City <b>Inverness</b>	State <b>FL</b>	Zip Code <b>34453-3860</b>	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>American Title Service of Centers Coun</b>	Occupation <b>President</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Charles K. Bergin, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address <b>73 Chestnut St</b>		<b>Transaction ID: IE060522.0010136</b>	
City <b>Springfield</b>	State <b>MA</b>	Zip Code <b>01103-1705</b>	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Law Offices of Charels K Bergin Jr</b>	Occupation <b>Lawyer</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1537 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. W. Kirby

Mailing Address 901 6th St SW

City Conover State NC Zip Code 28613-2909

FEC ID number of contributing federal political committee. **C**

Name of Employer Kirby Construction Services Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

**Transaction ID:** IE060522.0010137

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Anthony L. Stoddard

Mailing Address 2652 Commerce Way

City Ogden State UT Zip Code 84401-3204

FEC ID number of contributing federal political committee. **C**

Name of Employer Stone Castle Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

**Transaction ID:** IE060522.0010139

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jim Cassidy

Mailing Address 13021 Lakeland Rd

City Santa Fe Springs State CA Zip Code 90670-4518

FEC ID number of contributing federal political committee. **C**

Name of Employer Cassidy Roofing Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

**Transaction ID:** IE060522.0010140

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1538 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Frederick Gillis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1417 Las Vegas Blvd N		<b>Transaction ID: IE060522.0010141</b>	
City State Zip Code Las Vegas NV 89101-1115	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Center For Independent Living	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Eugene Byass</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 4623 Church Ave		<b>Transaction ID: IE060522.0010142</b>	
City State Zip Code Brooklyn NY 11203-3269	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Eugene Byass Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Bryan Xu</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1224 E Green St Ste 100		<b>Transaction ID: IE060522.0010143</b>	
City State Zip Code Pasadena CA 91106-3171	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dot Genesis LLC	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1539 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William Lee

Mailing Address 11613 N 20th Dr

City State Zip Code  
Phoenix AZ 85029-3618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Arizona School Locksmithing Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010144

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jimmy Lane

Mailing Address PO Box 156

City State Zip Code  
Hortense GA 31543-0156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jimmy Lane Logging Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010145

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey Simpson

Mailing Address 3152 Dixie Hwy

City State Zip Code  
Erlanger KY 41018-1899

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Johnnys Car Wash Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010147

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1540 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Mike Atoura</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 15055 Valley Blvd		<b>Transaction ID: IE060522.0010148</b>	
City State Zip Code Fontana CA 92335-6256	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation U & I Truck Sales Owner	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Dr. Dennis Aguirre</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 350 Blountville Hwy Ste 207		<b>Transaction ID: IE060522.0010149</b>	
City State Zip Code Bristol TN 37620-1671	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation INFO REQUESTED Doctor	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Darrel W. Walters, Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1130 Lee Blvd		<b>Transaction ID: IE060522.0010150</b>	
City State Zip Code Lehigh Acres FL 33936-4823	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation DW Walters Enterprises President	Aggregate Year-to-Date ▼ 5500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1541 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Nagui Guirgis Mailing Address 300 Red School Ln City Phillipsburg State NJ Zip Code 08865-2233 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> IE060522.0010155 Amount of Each Receipt this Period 150.00
Name of Employer Magnetika & Phillipsburg Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Judith A. Kalbas Mailing Address 342 Friendship Rd City Paige State TX Zip Code 78659-4876 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> IE060522.0010158 Amount of Each Receipt this Period 75.00
Name of Employer Self Occupation Business Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Rick Spurlin Mailing Address 7 Industrial Park Dr City Dover State NH Zip Code 03820-4332 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> IE060522.0010159 Amount of Each Receipt this Period 500.00
Name of Employer Just Right Awnings Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>725.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1542 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John L. Finley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1901 Brinson Rd Unit N7		<b>Transaction ID:</b> IE060522.0010162	
City Lutz	State FL	Zip Code 33558-3044	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Buck Finley Music	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Rimma Lipsky		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 59 Mill Rd Ext		<b>Transaction ID:</b> IE060522.0010163	
City Woodcliff Lk	State NJ	Zip Code 07677-8122	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Elr Reality LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John E. Regenold		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 70		<b>Transaction ID:</b> IE060522.0010164	
City Armorel	State AR	Zip Code 72310-0070	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Armorel Planting Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1543 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dan E. Hennessey

Mailing Address 1705 Moxahala Ave  
1705 Moxahala Ave

City Zanesville State OH Zip Code 43701-5952

FEC ID number of contributing federal political committee. **C**

Name of Employer P & D Transportation Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1031.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010165

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John H. Bulawa

Mailing Address 207 S Main St

City Hartford State WI Zip Code 53027-1821

FEC ID number of contributing federal political committee. **C**

Name of Employer Custom Done Llc Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5100.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010169

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joan S. Brigham

Mailing Address 2748 Beretania Cir

City Charlotte State NC Zip Code 28211-3638

FEC ID number of contributing federal political committee. **C**

Name of Employer Joan Brigham MD Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010170

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1544 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert C. Grantham, III		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1600 Bonnie Ln Ste 101-103 Ste. 101		<b>Transaction ID:</b> IE060522.0010171	
City State Zip Code Cordova TN 38016-0509	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer B. G. Contractors Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2850.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Okon E. Umana		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 100 Linn Ave		<b>Transaction ID:</b> IE060522.0010172	
City State Zip Code Yonkers NY 10705-2503	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Goodsamaritan World Chldrn Hlth Org	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Jo Broocks		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2227 Country Club Dr		<b>Transaction ID:</b> IE060522.0010173	
City State Zip Code Yazoo City MS 39194-2508	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1545 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Anthony Tirollo

Mailing Address 280 S River Rd

City State Zip Code  
Bedford NH 03110-6822

FEC ID number of contributing federal political committee. **C**

Name of Employer TRM Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010174

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard W. Bice

Mailing Address 4015 Glass Rd NE

City State Zip Code  
Cedar Rapids IA 52402-2524

FEC ID number of contributing federal political committee. **C**

Name of Employer Consumer Insurance Services Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010175

Amount of Each Receipt this Period  
1250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jeanette E. Baird

Mailing Address 136A Arch St # 253

City State Zip Code  
Keene NH 03431-2186

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
05 / 22 / 2006

Transaction ID: IE060522.0010176

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1546 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. John D. Herlihy, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 711 Allen Ave		<b>Transaction ID: IE060522.0010179</b>	
City Chillicothe	State OH	Zip Code 45601-1204	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Herlihy Moving & Storage Inc.	Occupation Finance Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Rita S. Harshman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 5728 Major Blvd Ste 611		<b>Transaction ID: IE060522.0010184</b>	
City Orlando	State FL	Zip Code 32819-7973	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer H & H Cleaning	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Stan E. Riegel</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 50 E 100 N # 210		<b>Transaction ID: IE060522.0010185</b>	
City Heber City	State UT	Zip Code 84032-1861	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Riegel & Associates	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1547 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. R. Peres

Mailing Address 44099 Plymouth Oaks Blvd  
Ste 112

City State Zip Code  
Plymouth MI 48170-6527

FEC ID number of contributing federal political committee. **C**

Name of Employer Sabo USA Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010187

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Carmine J. Rappucci

Mailing Address 2401 Pennsylvania Ave

City State Zip Code  
Wilmington DE 19806-1401

FEC ID number of contributing federal political committee. **C**

Name of Employer Health Point Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010188

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steven L. Petersen

Mailing Address 2121 Rosecrans Ave

City State Zip Code  
El Segundo CA 90245-4743

FEC ID number of contributing federal political committee. **C**

Name of Employer Auto Art Precision Detail Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010189

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1548 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Alan E. Williams		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1575 Avon Street Ext Ste 101		<b>Transaction ID:</b> IE060522.0010190	
City State Zip Code Charlottesville VA 22902-7227	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Piedmont Electronics & Co-communications	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Leigh Brand		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 195 Danbury Rd Ste 100		<b>Transaction ID:</b> IE060522.0010191	
City State Zip Code Wilton CT 06897-4003	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Brand Consulting Group In-c.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mehul J. Pandya		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 945 Pelican Bay Dr		<b>Transaction ID:</b> IE060522.0010194	
City State Zip Code Daytona Beach FL 32119-8329	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Florida Hospital	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1549 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Sergio Gonzalez

Mailing Address PO Box 26888

City State Zip Code  
El Paso TX 79926-6888

FEC ID number of contributing federal political committee. **C**

Name of Employer United States of America Power Tool  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010197

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Albert M. Hernandez, II

Mailing Address 9402 E US Highway 92

City State Zip Code  
Tampa FL 33610-5953

FEC ID number of contributing federal political committee. **C**

Name of Employer Last Chance Cycles Inc.  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010199

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Lisa B. Diossi

Mailing Address 118 Gideon Dr

City State Zip Code  
Kennet Sq PA 19348-1554

FEC ID number of contributing federal political committee. **C**

Name of Employer Lisa Broadbent Diossi  
Occupation Self - Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2006

Transaction ID: IE060522.0010203

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1550 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Subhash N. Dani		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 255 US Highway 22 Ste 1		Transaction ID: IE060522.0010210
City State Zip Code Green Brook NJ 08812-1807	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Subhash N Dani CPA	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Stephen D. Berman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 134 N Lasalle St Ste 1618		Transaction ID: IE060522.0010211
City State Zip Code Chicago IL 60602-1108	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Law Offices Stephen D Berman Ltd.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Steven E. Stein		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 575 Lexington Ave Fl 31		Transaction ID: IE060522.0010213
City State Zip Code New York NY 10022-6111	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Steven E Stein	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1551 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Everett G. Topham		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 415 3rd Ave		<b>Transaction ID:</b> IE060522.0010214	
City State Zip Code Havre MT 59501-3913	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Everett G Topham	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Vincenzo Scollo		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1220 Fairport Rd		<b>Transaction ID:</b> IE060522.0010215	
City State Zip Code Fairport NY 14450-1248	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Vincenzo Scolló Agency In- c.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Daniel Wezniak Aia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 300 W Main St Bldg A		<b>Transaction ID:</b> IE060522.0010216	
City State Zip Code Northborough MA 01532-2132	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Silver Street Architects LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1552 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Martin A. Gleason		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 114 E Union Ave		<b>Transaction ID:</b> IE060522.0010218	
City State Zip Code Bound Brook NJ 08805-1714	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Martin A Gleason	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ernest Hurst		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 2001 N Frontage Rd		<b>Transaction ID:</b> IE060522.0010222	
City State Zip Code Beeville TX 78102-2955	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hurst Properties	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ernie Munday		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1112 N 10th Ave		<b>Transaction ID:</b> IE060522.0010224	
City State Zip Code Hanford CA 93230-3746	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer State Farm Insurance	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1553 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George Curtis

Mailing Address 224 Cobblestone Dr

City State Zip Code  
Antioch CA 94509-6210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Curtis Real Estate Investments Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010226

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Stan Carlson

Mailing Address 41531 Cherry St

City State Zip Code  
Murrieta CA 92562-9193

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Carlson Engineering Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010226

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. B. Gordon

Mailing Address 1903 Carl Jones Rd

City State Zip Code  
Moody AL 35004-3220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Select Truck of Birmingham Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010226

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1554 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Z. Wang

Mailing Address 20954 Corsair Blvd

City State Zip Code  
Hayward CA 94545-1002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ablesys Corp. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010230

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Scott W. Klatt

Mailing Address 33702 112th Ave

City State Zip Code  
Avon MN 56310-9684

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Diamond Wire & Metal Products Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010231

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Howard A. Barnes

Mailing Address 4180 W Calle Seis

City State Zip Code  
Green Valley AZ 85614-5327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ymi Computing Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Transaction ID: IE060522.0010233

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1555 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Mike Ash</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 20581 John J Williams Hwy		<b>Transaction ID:</b> IE060522.0010235	
City Lewes	State DE	Zip Code 19958-4307	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Angola Marine	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Jackie Yow</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 5926 McLeansville Rd		<b>Transaction ID:</b> IE060523.0010002	
City Mc Leansville	State NC	Zip Code 27301-9703	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Yow's Trucking Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert F. Carbone</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 1304 L St		<b>Transaction ID:</b> IE060523.0010003	
City Bakersfield	State CA	Zip Code 93301-4509	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Robert F. Carbone, Atty. at Law	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1556 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Aura Olivas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 306 Alcazar Ave Suite-201		<b>Transaction ID:</b> IE060523.0010004
City State Zip Code Coral Gables FL 33134-4318	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Aura Olivas Pa Manager	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Cheryl T. Hickey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 11175 Tam Oshanter Blvd		<b>Transaction ID:</b> IE060523.0010009
City State Zip Code Sebring FL 33875-9484	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Hickey Excavation Inc. President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jeff D. Penca		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 1115 4th St		<b>Transaction ID:</b> IE060523.0010011
City State Zip Code Fulton IL 61252-1717	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Crystal Clear Pools & Spas Owner	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1557 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Ronald B. Wildman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 4747 Bonnie Branch Rd		<b>Transaction ID:</b> IE060523.0010013	
City State Zip Code Ellicott City MD 21043-6809	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wildman Environmental Service Inc.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jan Bertling		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 305 Mary Beth Dr		<b>Transaction ID:</b> IE060523.0010015	
City State Zip Code Greenville NC 27858-8119	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hermes Medical Solutions Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Lee Arnold		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 230 International Pkwy		<b>Transaction ID:</b> IE060523.0010017	
City State Zip Code Dallas GA 30157-5702	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Architectural Details & Millwork	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1558 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Lori Wagner

Mailing Address 536 E 12th St

City Rifle State CO Zip Code 81650-3612

FEC ID number of contributing federal political committee. **C**

Name of Employer Summit Christian Academy Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010019

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark Kirchmer

Mailing Address PO Box 511198

City Livonia State MI Zip Code 48151-7198

FEC ID number of contributing federal political committee. **C**

Name of Employer Poly Flex Products Inc. Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010022

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jimmy Valrie

Mailing Address 460 Ferrara Ct Ste 20

City Pomona State CA Zip Code 91766-0905

FEC ID number of contributing federal political committee. **C**

Name of Employer Black Coat Group Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010023

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1559 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Elle Seymour</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 1607 Mission Dr Ste 202		<b>Transaction ID:</b> IE060523.0010027	
City State Zip Code Solvang CA 93463-3639	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 500.00		
Name of Employer Re-Max Prestige Properties	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jeremy L. Cribb</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 1528 Feed Mill Rd		<b>Transaction ID:</b> IE060523.0010028	
City State Zip Code Whiteville NC 28472-4319	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 500.00		
Name of Employer Cribb Estate Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Joey M. Lionetti</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 530 Fashion Ave Rm 3001		<b>Transaction ID:</b> IE060523.0010030	
City State Zip Code New York NY 10018-4946	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 500.00		
Name of Employer Select Agency Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	500.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1560 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Benjamin Hanson

Mailing Address 1805 W Plaza Dr

City Winchester State VA Zip Code 22601-6365

FEC ID number of contributing federal political committee. **C**

Name of Employer Benjamin S Hanson DDS MS PC Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010031

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Earl Scheidler

Mailing Address 11043 Main St

City Cincinnati State OH Zip Code 45241-2678

FEC ID number of contributing federal political committee. **C**

Name of Employer Earl C Scheidler Do Inc. Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010036

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James M. Alarid

Mailing Address 9000 National Rm 123

City Las Vegas State NM Zip Code 87701

FEC ID number of contributing federal political committee. **C**

Name of Employer Vista Sin Limites Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010039

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1561 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ruben L. Ford

Mailing Address 1225 SE 4th Ter

City State Zip Code  
Chiefland FL 32626-0342

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Training Systems Inc. Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010040

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lancy O. Burns

Mailing Address 615 Hope Rd

City State Zip Code  
Eatontown NJ 07724-1277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Viotech Inc. Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010042

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Rebecca Howe

Mailing Address 1011 W Friendly Ave

City State Zip Code  
Greensboro NC 27401-1862

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rebecca L Howe DDS Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010043

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1562 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. J.Howard Jarrott, IV		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 183 Three Mast Ct		<b>Transaction ID:</b> IE060523.0010044	
City State Zip Code Savannah GA 31410-2132	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Investors Group	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ricardo A. Figueroa		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 7365 Carnelian St Ste 217		<b>Transaction ID:</b> IE060523.0010045	
City State Zip Code Rancho Cucamonga CA 91730-1157	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Figueroa Law Corp.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Bernard Thelen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 10839 E 5th St		<b>Transaction ID:</b> IE060523.0010046	
City State Zip Code Fowler MI 48835-9619	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Berlyn Acres LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1563 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jose E. Santana Mailing Address 7115 5th Ave City State Zip Code Brooklyn NY 11209-1608 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> IE060523.0010048 Amount of Each Receipt this Period 250.00
Name of Employer Tooth Doctor Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Charles H. Mullins Mailing Address 1650 Kenly Ave City State Zip Code Lackland A F B TX 78236-5167 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> IE060523.0010053 Amount of Each Receipt this Period 500.00
Name of Employer Lackland Gateway Collocat- ed Club Occupation General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Mildred Styles-Hoffman Mailing Address 3046 E Hollywood Ave City State Zip Code Terre Haute IN 47805-2149 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> IE060523.0010054 Amount of Each Receipt this Period 500.00
Name of Employer Hair Styles By Styles Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1564 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Peter O. Hansen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 805 Frontage Rd Ste 123		<b>Transaction ID:</b> IE060523.0010055
City Kenai	State AK	Zip Code 99611-9104
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Kenai Medical Center Inc.	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard F. Young		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 45 School St		<b>Transaction ID:</b> IE060523.0010057
City Boston	State MA	Zip Code 02108-3206
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Welch & Forbes	Occupation Investment Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Tim C. Haley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 219 N Bickford Ave		<b>Transaction ID:</b> IE060523.0010058
City El Reno	State OK	Zip Code 73036-2714
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Haley Law Office	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1565 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David C. McGregor		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 5134 Manchester Hwy		<b>Transaction ID:</b> IE060523.0010059	
City Morrison	State TN	Zip Code 37357-7501	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer David C McGregor Nursery	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David D. Carter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 3258 Fowler St		<b>Transaction ID:</b> IE060523.0010060	
City Fort Myers	State FL	Zip Code 33901-7317	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ft. Myers Auto Sales	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Carlos S. Armendariz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address PO Box 2167		<b>Transaction ID:</b> IE060523.0010064	
City Presidio	State TX	Zip Code 79845-2167	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer C & L Farms	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1566 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph G. Ridgway

Mailing Address 3427 59th St

City Lubbock State TX Zip Code 79413-4730

FEC ID number of contributing federal political committee. **C**

Name of Employer Ridgway Lawn Services Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010067

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James C. Schwartz

Mailing Address 750 W Resource Dr

City Brooklyn Hts State OH Zip Code 44131-1878

FEC ID number of contributing federal political committee. **C**

Name of Employer Mortgage Now Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010068

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Doris Hertel

Mailing Address 6017 Pine Ridge Rd Ste 221

City Naples State FL Zip Code 34119-3956

FEC ID number of contributing federal political committee. **C**

Name of Employer ATM's Inc. of South Florida Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010069

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1567 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edward A. Gaydosh

Mailing Address 13374 Ridge Rd

City State Zip Code  
North Royalton OH 44133-3857

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Royalton Financial Group

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010071

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Desmond G. Hague

Mailing Address 2930 W Maple St

City State Zip Code  
Sioux Falls SD 57107-0745

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hot Stuff Foods

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010074

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas M. Mettler

Mailing Address 340 Royal Poinciana Plz

City State Zip Code  
Palm Beach FL 33480-4048

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Mettler Shelton Randolph & Mer

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010077

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1568 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Earl Thomason		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 890 434 Tranquil Dr		<b>Transaction ID:</b> IE060523.0010078
City State Zip Code Laurens SC 29360-8832	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Earl Thomason Jewelers In-c.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kamran Lalehpour		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 117 W 9th St		<b>Transaction ID:</b> IE060523.0010079
City State Zip Code Los Angeles CA 90015-1509	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Millennium Insurance Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Francois J. Henley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 61 Daggett Dr		<b>Transaction ID:</b> IE060523.0010080
City State Zip Code San Jose CA 95134-2109	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Silicon Genesis Corp.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1569 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joe Rodriguez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 5527 Woodland Ln		<b>Transaction ID:</b> IE060523.0010081
City State Zip Code Ft Lauderdale FL 33312-6249	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer The Cheetah	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Rita S. Singhal		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 340 Greece Ridge Ctr Dr		<b>Transaction ID:</b> IE060523.0010082
City State Zip Code Rochester NY 14626-2819	Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Geoff Bryce		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 200 N La Salle St Ste 2700		<b>Transaction ID:</b> IE060523.0010083
City State Zip Code Chicago IL 60601-1099	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Bryce Downey	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1570 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Louana M. McBee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 2418 Stonybrook Dr		<b>Transaction ID: IE060523.0010084</b>	
City State Zip Code Wellington FL 33414-9343	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer McBee Capital LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Elwin S. Larson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 69 Utterby Rd		<b>Transaction ID: IE060523.0010090</b>	
City State Zip Code Malverne NY 11565-1719	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Joanne F. Serraino</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 204 Harrison Ave		<b>Transaction ID: IE060523.0010091</b>	
City State Zip Code Hasbrouck Hts NJ 07604-1604	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2850.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1571 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Martin L. Allday

Mailing Address 600 Congress Ave Ste 1750  
Ste 1500

City Austin State TX Zip Code 78701-3238

FEC ID number of contributing federal political committee. **C**

Name of Employer Scott Douglass & Mc Curni-co  
Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010092

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Hugo R. Escobar, MD

Mailing Address 53 E Cleveland Ave

City Porterville State CA Zip Code 93257-3748

FEC ID number of contributing federal political committee. **C**

Name of Employer Success Valley Medical Group  
Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010093

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Kathy L. Chaney

Mailing Address 72 NW 485th Rd

City Warrensburg State MO Zip Code 64093-7427

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired  
Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: IE060523.0010094

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3250.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1572 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Sharron R. Olson

Mailing Address 46 Professional Dr

City State Zip Code  
Brunswick GA 31520-3774

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Share Care Services Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010095

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph A. Scott, Jr.

Mailing Address PO Box 200500

City State Zip Code  
San Antonio TX 78220-0500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
World Technical Services Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010096

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Mary L. Berry

Mailing Address 8524 S Western Ave Ste 102

City State Zip Code  
Oklahoma City OK 73139-9247

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Century 21 All Pro Broker/ Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010098

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1573 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Nancy M. Hasha</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 2600 Industrial Blvd		<b>Transaction ID:</b> IE060523.0010099	
City State Zip Code West Sacramento CA 95691-3825	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hd Distribution Co. Occupation Owner	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Ms. Pauline Harger</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 306 Owen Dr		<b>Transaction ID:</b> IE060523.0010100	
City State Zip Code Fayetteville NC 28304-3415	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Harger Co. Occupation Owner	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Dr. Francine Greenfield</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 800 W Long Lake Rd Ste 145		<b>Transaction ID:</b> IE060523.0010101	
City State Zip Code Bloomfield Hills MI 48302-2033	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Francine Greenfield DDS Occupation Doctor	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1574 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Paul Hudson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 2115 Teakwood Ln Ste 300		<b>Transaction ID:</b> IE060523.0010103	
City State Zip Code Plano TX 75075-4409	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ph. Consulting	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Mata E. Rubino</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 9030 Red Branch Rd Ste 190		<b>Transaction ID:</b> IE060523.0010110	
City State Zip Code Columbia MD 21045-2012	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rubino Enterprises Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Norma Albritton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 524 S Combee Rd		<b>Transaction ID:</b> IE060523.0010111	
City State Zip Code Lakeland FL 33801-6310	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pioneer Underground Utilities Inc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1575 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael E. D'Antoni		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 2310 Hempstead Tpke Unit 2		<b>Transaction ID:</b> IE060523.0010113
City State Zip Code East Meadow NY 11554-2035	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Versa-Tel. Ts Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Patricia Honeywell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 19 W Merrick Rd		<b>Transaction ID:</b> IE060523.0010115
City State Zip Code Valley Stream NY 11580-5718	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pdh Insurance Brokers	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert L. Sander		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 105 Chesterfield Business Pkwy		<b>Transaction ID:</b> IE060523.0010116
City State Zip Code Chesterfield MO 63005-1233	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Lane Sander State Farm	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1576 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Treva M. Roanhorse

Mailing Address PO Box 1420

City State Zip Code  
Window Rock AZ 86515-1420

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Consortia of Administrators for NATI

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: IE060523.0010117

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Donald A. Ruedlinger

Mailing Address 10325 Orangewood Blvd

City State Zip Code  
Orlando FL 32821-8239

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Youth Basketball Of America

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: IE060523.0010118

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Max Spillar

Mailing Address 750 North Fwy

City State Zip Code  
Fort Worth TX 76102-1722

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Spillar, Mitcham Eaton Bicknell Cpa

Occupation  
Accountant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2006

Transaction ID: IE060523.0010123

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1577 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Bruce Beck</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 59 Central Ave Ste 18		<b>Transaction ID:</b> IE060523.0010124	
City Farmingdale	State NY	Zip Code 11735-6902	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Environmental Mgmt.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Martha Lee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 1660 W Broadway Apt 347		<b>Transaction ID:</b> IE060523.0010127	
City Anaheim	State CA	Zip Code 92802-1149	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Me Security	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Bill H. Holland</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 3041 Highway 70 E		<b>Transaction ID:</b> IE060523.0010129	
City Waverly	State TN	Zip Code 37185-2224	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Holland Contractors Inc.	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1578 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Lawrence H. Rogers, II Mailing Address 4600 Drake Rd City State Zip Code Cincinnati OH 45243-4118 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> IE060523.0010130 Amount of Each Receipt this Period 150.00
Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Author Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Norberto G. Concepcious Mailing Address 19 Iron Dr City State Zip Code West Warwick RI 02893-2004 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> IE060523.0010131 Amount of Each Receipt this Period 200.00
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mercedes Nakano Mailing Address 9360 Baseline Rd Ste K City State Zip Code Alta Loma CA 91701-5800 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> IE060523.0010137 Amount of Each Receipt this Period 250.00
Name of Employer Coutry Wagon Resot Grooming Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1579 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Aurora V. Venegas

Mailing Address PO Box 6647

City State Zip Code  
Chicago IL 60680-6647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Azteca Supply Co. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010138

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Carl D. Bohl

Mailing Address 844 Woodside Trails Dr

City State Zip Code  
Ballwin MO 63021-6187

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010142

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gustavo J. Garcia-Montes

Mailing Address 6780 Coral Way

City State Zip Code  
Miami FL 33155-1702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Stipan Investments Corp. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: IE060523.0010143

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1580 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Cheryl A. Petersilge		Date of Receipt MM / DD / YYYY 05 / 23 / 2006
Mailing Address 7775 Thistle Ln		<b>Transaction ID:</b> IE060523.0010144
City Novelty	State OH	Zip Code 44072-9573
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Cheryl A Petersilge MD In-c.	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Larry G. McGlothlin		Date of Receipt MM / DD / YYYY 05 / 23 / 2006
Mailing Address 3012 Forest Hills Cir		<b>Transaction ID:</b> IE060523.0010151
City Lynchburg	State VA	Zip Code 24501-2312
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Lynchburg Chiropractic Ce- nter	Occupation Chiropractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William R. Lupone		Date of Receipt MM / DD / YYYY 05 / 23 / 2006
Mailing Address 246 S Main St Apt 2		<b>Transaction ID:</b> IE060523.0010152
City Stowe	State VT	Zip Code 05672-4970
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer William R Lapone Apts.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1581 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard G. Garverick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address PO Box 590		<b>Transaction ID:</b> IE060523.0010154	
City Herndon	State VA	Amount of Each Receipt this Period 300.00	
Zip Code 20172-0590			
FEC ID number of contributing federal political committee. C			
Name of Employer RGG Finacrcial LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Daniel J. Cooper		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 24012 Calle De La Plata Ste 410		<b>Transaction ID:</b> IE060523.0010155	
City Laguna Hills	State CA	Amount of Each Receipt this Period 300.00	
Zip Code 92653-7623			
FEC ID number of contributing federal political committee. C			
Name of Employer Daniel J Cooper Professional Corp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Herbert N. Posner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 800 Westchester Ave Ste S340		<b>Transaction ID:</b> IE060523.0010157	
City Rye Brook	State NY	Amount of Each Receipt this Period 300.00	
Zip Code 10573-1354			
FEC ID number of contributing federal political committee. C			
Name of Employer Herbert N Posner Atty. at Law	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1582 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Basil A. Santini		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 145 Main St		<b>Transaction ID:</b> IE060523.0010166
City State Zip Code Port Washington NY 11050-3239	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Mid-Ship Marine, Inc.	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John R. Pratt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 112 Mimosa Dr		<b>Transaction ID:</b> IE060523.0010172
City State Zip Code Montgomery AL 36109-3441	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pratt Communications Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Brad Edstrom		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 1106 N 17th St		<b>Transaction ID:</b> IE060523.0010173
City State Zip Code Superior WI 54880-2831	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Northland Supply Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1583 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Roy Dedeic		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 82 Midland Ave		<b>Transaction ID:</b> IE060524.0010003	
City State Zip Code Montclair NJ 07042-2916	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Roy Dedeic & Associates, Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David L. Olson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 813 Kentwood Dr		<b>Transaction ID:</b> IE060524.0010005	
City State Zip Code Boardman OH 44512-5004	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Olson Enterprises LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Maggie E. Klein		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 2340 Whitfield Park Ave		<b>Transaction ID:</b> IE060524.0010006	
City State Zip Code Sarasota FL 34243-4084	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Clifton Consolidated Corp.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1584 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Jason Schulman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 4430 Sheridan St Ste B		<b>Transaction ID:</b> IE060524.0010007
City Hollywood State FL Zip Code 33021-3546	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Hollywood Pediatrics Occupation Owner	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Milton F. Knight		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 26624 Glenwood Rd		<b>Transaction ID:</b> IE060524.0010009
City Perrysburg State OH Zip Code 43551-4846	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer New Waste Concepts Inc. Occupation CEO	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mark J. Unterbach		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 141 Industrial St		<b>Transaction ID:</b> IE060524.0010010
City San Francisco State CA Zip Code 94124-1915	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Garnett Sign Studio Occupation Owner	Aggregate Year-to-Date ▼ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1585 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. M. Lam		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 10525 Vista Del Sol Dr		Transaction ID: IE060524.0010015	
City State Zip Code El Paso TX 79925-7944	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer M Tai Lam MD	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David C. Zwier		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 4339 Redfield Ct SW		Transaction ID: IE060524.0010016	
City State Zip Code Grandville MI 49418-3056	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Safety Rules Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Heather D. Warren		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 8848 S Seneca St		Transaction ID: IE060524.0010017	
City State Zip Code Weedsport NY 13166-9633	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Heather Warren, Land Surveyer, PLLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1586 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Eddie Giles

Mailing Address 1550 Garden Ct

City State Zip Code  
Charlottesville VA 22901-8980

FEC ID number of contributing federal political committee. **C**

Name of Employer Professional Movers Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010018

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joe Hill

Mailing Address 96398 High Pointe Dr

City State Zip Code  
Fernandina Beach FL 32034-6955

FEC ID number of contributing federal political committee. **C**

Name of Employer Total Power Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010022

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Walter Eaves

Mailing Address PO Box 919

City State Zip Code  
Elberton GA 30635-0919

FEC ID number of contributing federal political committee. **C**

Name of Employer Bubba Foods Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010026

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1587 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Miguel A. Cisneros

Mailing Address 505 W Elizabeth St

City State Zip Code  
Brownsville TX 78520-6313

FEC ID number of contributing federal political committee. C

Name of Employer Bugambillas Restaurant      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

**Transaction ID:** IE060524.0010027

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Anthony Popek

Mailing Address 10497 Town And Country Way 36

City State Zip Code  
Houston TX 77024-1117

FEC ID number of contributing federal political committee. C

Name of Employer A J Popek MD      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

**Transaction ID:** IE060524.0010029

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Willy J. Arts

Mailing Address 4597 Avenue 272

City State Zip Code  
Visalia CA 93277-9415

FEC ID number of contributing federal political committee. C

Name of Employer WJ Farms      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

**Transaction ID:** IE060524.0010030

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">900.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1588 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Sharon McGee

Mailing Address 3312 Duke Rd

City State Zip Code  
Austin TX 78724-2510

FEC ID number of contributing federal political committee. **C**

Name of Employer Rm Mechanical Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

Transaction ID: IE060524.0010031

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Mark Dumas

Mailing Address 765 Allens Ave

City State Zip Code  
Providence RI 02905-5443

FEC ID number of contributing federal political committee. **C**

Name of Employer Psychological Centers Inc. Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

Transaction ID: IE060524.0010032

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John P. Hart

Mailing Address 3091 W Galbraith Rd

City State Zip Code  
Cincinnati OH 45239-4285

FEC ID number of contributing federal political committee. **C**

Name of Employer SelectionMgmt Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

Transaction ID: IE060524.0010034

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1589 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Connie Stevens</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 426 S Robertson Blvd		<b>Transaction ID:</b> IE060524.0010036	
City State Zip Code Los Angeles CA 90048-3908	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Forever Spring CEO	Aggregate Year-to-Date ▼ 700.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Darell M. Fort</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 4715 30th St Ste 6		<b>Transaction ID:</b> IE060524.0010037	
City State Zip Code San Diego CA 92116-1564	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Usavmoney.com Inc. CEO	Aggregate Year-to-Date ▼ 6000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mrs. Zhanna Alergant</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 340 Evelyn St		<b>Transaction ID:</b> IE060524.0010038	
City State Zip Code Paramus NJ 07652-2908	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation New Life Adult Medical Day Care President	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1590 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Richard G. Baxter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 7477 Salmon Creek Rd		<b>Transaction ID: IE060524.0010041</b>	
City State Zip Code Williamson NY 14589-9577	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Baxter Realty Group Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Missy Mcquattie</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1025 Ridgeview Dr		<b>Transaction ID: IE060524.0010043</b>	
City State Zip Code Reno NV 89509-6322	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Commercial Industrial Real Estate	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Mark H. Shulman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 2121 SW 3rd Ave Ste 200		<b>Transaction ID: IE060524.0010045</b>	
City State Zip Code Miami FL 33129-1490	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer American Southern Financial Group LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1591 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Leo Godzich		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 13422 N Cave Creek Rd		<b>Transaction ID:</b> IE060524.0010046
City State Zip Code Phoenix AZ 85022-5165	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Name-National Association of Marri	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Bruce R. Griffith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 6200 E 11 Mile Rd		<b>Transaction ID:</b> IE060524.0010049
City State Zip Code Warren MI 48091-1293	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BodyByBruce	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Phil F. Daubel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 3500 Sullivant Ave		<b>Transaction ID:</b> IE060524.0010052
City State Zip Code Columbus OH 43204-1105	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Web-n-type Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 701.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1592 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Elias Chammas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address G3348 Flushing Rd		<b>Transaction ID: IE060524.0010053</b>	
City State Zip Code Flint MI 48504-4239	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Paradise Mini-mart	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Valerie T. Maros</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address PO Box 698		<b>Transaction ID: IE060524.0010054</b>	
City State Zip Code Fabens TX 79838-0698	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Maros Family Partnership Ltd.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) <b>C. Shannon J. Carson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 3600 S State Road 7 Ste 232		<b>Transaction ID: IE060524.0010057</b>	
City State Zip Code Miramar FL 33023-5289	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Florida New Hope Real Estate	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1593 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Anamaria Rivera

Mailing Address 18622 SW 49th St

City State Zip Code  
Miramar FL 33029-6247

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Strategium LLC Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

Transaction ID: IE060524.0010059

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Mujahed M. Ahmed

Mailing Address 2669 Forest Hill Blvd Ste 100  
Ste 100

City State Zip Code  
West Palm Beach FL 33406-5966

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Palm Beach Family Physi- Owners

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

Transaction ID: IE060524.0010060

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Raymond R. Ghods

Mailing Address 2835 N Military Trl

City State Zip Code  
West Palm Beach FL 33409-2625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Video Ave. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

Transaction ID: IE060524.0010062

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1594 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Randy G. Hecker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 3807 Sierra Hwy Ste 5		<b>Transaction ID: IE060524.0010063</b>	
City State Zip Code Acton CA 93510-1256	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CJS Clothing Accessories	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. David W. Caraway</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 233 12th St Ste 400		<b>Transaction ID: IE060524.0010064</b>	
City State Zip Code Columbus GA 31901-2411	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer David W. Caraway CPA LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. John M. Lanciotti</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 6960 Long Leaf Dr		<b>Transaction ID: IE060524.0010065</b>	
City State Zip Code Parkland FL 33076-3946	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer S.M.H Lancé Corp.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1595 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John S. Trigero

Mailing Address 2800 Thomas Jefferson Dr

City State Zip Code  
Reno NV 89509-3001

FEC ID number of contributing federal political committee. C

Name of Employer Trigero Partnership      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

**Transaction ID:** IE060524.0010066

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David Auringer

Mailing Address 6 Keifer Ln

City State Zip Code  
Kingston NY 12401-2206

FEC ID number of contributing federal political committee. C

Name of Employer New York PRE-Cast. LLC      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

**Transaction ID:** IE060524.0010067

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Artem Asriants

Mailing Address 717 Bustleton Pike

City State Zip Code  
Feasterville Trevo PA 19053-6055

FEC ID number of contributing federal political committee. C

Name of Employer New Century Real Estate      Occupation Broker

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

**Transaction ID:** IE060524.0010068

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1596 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Rafael Carmona

Mailing Address PO Box 25410

City State Zip Code  
Providence RI 02905-0410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Chk. Auto Glass Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010069

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Tanya G. Bratslavsky Pe

Mailing Address 500 W 27th Ave  
Ste A

City State Zip Code  
Anchorage AK 99503-2575

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bratslavsky Consulting Eng-  
ineers President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010070

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Dimitrios Dimitriacopoulo

Mailing Address 11412 Abercorn St

City State Zip Code  
Savannah GA 31419-1828

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hermes Import Export President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010072

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1800.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1597 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Schuman S. Tu

Mailing Address 16005 24th Rd

City State Zip Code  
Whitestone NY 11357-3942

FEC ID number of contributing federal political committee. **C**

Name of Employer Maxin Capital Corp. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt  
05 / 24 / 2006

Transaction ID: IE060524.0010078

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeff S. Bradford

Mailing Address 4818 Woodall St

City State Zip Code  
Dallas TX 75247-6709

FEC ID number of contributing federal political committee. **C**

Name of Employer Cross Media Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 24 / 2006

Transaction ID: IE060524.0010081

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Shawn Harper

Mailing Address 531 NE E St Ste B

City State Zip Code  
Grants Pass OR 97526-2365

FEC ID number of contributing federal political committee. **C**

Name of Employer Shawn Harper Insurance Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 24 / 2006

Transaction ID: IE060524.0010082

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1598 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark Shively

Mailing Address 1201 Havemann Rd

City State Zip Code  
Celina OH 45822-1391

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mold Medic Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010083

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Theresa Allee

Mailing Address 110 Mackqueen Dr

City State Zip Code  
Brunswick GA 31525-4539

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
J T & J Associates Secretary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010084

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Derrick Cunningham

Mailing Address 125 42nd St

City State Zip Code  
Manhattan Beach CA 90266-3001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Aquisitions By Dc, Inc. Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010085

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1599 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David F. Grant		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 17210 Edwards Rd		<b>Transaction ID:</b> IE060524.0010087	
City State Zip Code Cerritos CA 90703-2426	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Omni-lite Industries California Inc.	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles E. Archambault		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address PO Box 249		<b>Transaction ID:</b> IE060524.0010089	
City State Zip Code Browning MT 59417-0249	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Archambault & Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael Bailey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address PO Box 1326		<b>Transaction ID:</b> IE060524.0010093	
City State Zip Code Riverton WY 82501-0158	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Central Wyoming Whls. Dis- trs Llc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1600 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edward J. Allison

Mailing Address 78 Eastern Blvd

City State Zip Code  
Glastonbury CT 06033-4325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Allison Construction Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

Transaction ID: IE060524.0010095

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Holly Reamer

Mailing Address 371 S Main St

City State Zip Code  
Phillipsburg NJ 08865-3069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Integrity Catering President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

Transaction ID: IE060524.0010096

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David Rafalski

Mailing Address 2417 Cedar Key Dr

City State Zip Code  
Lake Orion MI 48360-1823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
David W. Rafalski CPA PC President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2006

Transaction ID: IE060524.0010100

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1601 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Mary L. Rogers</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address <b>PO Box 574</b>		<b>Transaction ID: IE060524.0010103</b>	
City <b>North Bend</b>	State <b>WA</b>	Amount of Each Receipt this Period 150.00	
Zip Code <b>98045-0574</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Kenn's Gas &amp; Grocery LLC</b>	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ali Shahabi</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address <b>1760 Halford Ave Unit 360</b>		<b>Transaction ID: IE060524.0010105</b>	
City <b>Santa Clara</b>	State <b>CA</b>	Amount of Each Receipt this Period 200.00	
Zip Code <b>95051-2659</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Real Estate Engineering, Inc</b>	Occupation <b>President</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael J. Miller</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address <b>123 W Main St</b>		<b>Transaction ID: IE060524.0010106</b>	
City <b>Barrington</b>	State <b>IL</b>	Amount of Each Receipt this Period 500.00	
Zip Code <b>60010-4371</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Mj Miller Comany Inc.</b>	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1602 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mitchell D. Hale

Mailing Address PO Box 671572

City State Zip Code  
Chugiak AK 99567-1572

FEC ID number of contributing federal political committee. **C**

Name of Employer Precision Plus Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010108

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Donald V. Dougherty

Mailing Address 1 International Pl

City State Zip Code  
Boston MA 02110-2602

FEC ID number of contributing federal political committee. **C**

Name of Employer Cc Growth Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010111

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Paul E. Hoehner

Mailing Address 24835 Beierman Ave

City State Zip Code  
Warren MI 48091-1795

FEC ID number of contributing federal political committee. **C**

Name of Employer Apl Logistics Americas Lt-d. Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010112

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1604 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Hani Sawaged

Mailing Address 10732 Amesbury Way

City State Zip Code  
Highlands Ranch CO 80126-8043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Daveco Liquors Corporation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010118

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Greg Adamson

Mailing Address 1324 N Hickory Hills Rd

City State Zip Code  
Metamora IL 61548-9418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Orthopedic of Illinois Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010119

Amount of Each Receipt this Period  
12500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Joel Casteel

Mailing Address 129 Moses Thompson Ln

City State Zip Code  
State College PA 16801-6840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Casteel Chiropractic Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010121

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	13050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1605 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Gabriele Kerschman

Mailing Address 28234 State 34

City State Zip Code  
Akeley MN 56433-8024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Brauhaus Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010122

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Janet L. Melloni

Mailing Address 4000 Gateway Rd

City State Zip Code  
Bethel Island CA 94511-5447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Melloni Construction President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010123

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William T. Bowen

Mailing Address 109 Elmwood St

City State Zip Code  
Springhill LA 71075-2821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.67

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: IE060524.0010126

Amount of Each Receipt this Period  
1666.67

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2166.67
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1606 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Suzanne Ferry</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 550 Corey Ave		<b>Transaction ID:</b> IE060524.0010127	
City State Zip Code St Pete Beach FL 33706-3603	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Blakely Resorts	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. James A. Vaughn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 9340 Balada St		<b>Transaction ID:</b> IE060524.0010128	
City State Zip Code Coral Gables FL 33156-2361	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer James A. Vaughn M. D.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Mary Bloom</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1205 Westlakes Dr Ste 355		<b>Transaction ID:</b> IE060524.0010129	
City State Zip Code Berwyn PA 19312-2405	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sunbelt Bus Advisors Of The Main Li	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1607 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bruce A. Ellertson

Mailing Address 207 Main St N

City State Zip Code  
Lakota ND 58344-7103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nodak Mutual Insurance Co. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 24 / 2006

Transaction ID: IE060524.0010131

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth S. Hendrick

Mailing Address 1363 N Delaware St

City State Zip Code  
Sanford FL 32771-9040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Insurance Office Of American Vice President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 24 / 2006

Transaction ID: IE060524.0010132

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Dayna Bolera

Mailing Address 1616 Grant St

City State Zip Code  
Portsmouth OH 45662-3663

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lawyer Chiropractic Clinic, Inc. Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1666.67

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 24 / 2006

Transaction ID: IE060524.0010133

Amount of Each Receipt this Period  
1666.67

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1966.67
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1608 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Sharon Reeves</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 780 Lockhart Gulch Rd		<b>Transaction ID:</b> IE060524.0010137	
City State Zip Code Scotts Valley CA 95066-2915	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Executive Business Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Karen Arnett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 755 W James Lee Blvd		<b>Transaction ID:</b> IE060524.0010138	
City State Zip Code Crestview FL 32536-5132	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Superior First Response Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Chau Vo</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 107 S Harding Blvd Ste K		<b>Transaction ID:</b> IE060524.0010141	
City State Zip Code Roseville CA 95678-3354	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kimphuong Hair & Nail	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1609 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael S. Lee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 2109 W 54th St		Transaction ID: IE060524.0010142
City State Zip Code Los Angeles CA 90062-2130	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MGSL Jazmin & Britni Fashions	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Timothy J. Ketelsen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 669 Longview Dr		Transaction ID: IE060524.0010145
City State Zip Code Douglas WY 82633-2755	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer J & J Analytical Services, Llc	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Janet McClelland		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 7240 W 98th Ter Ste 105		Transaction ID: IE060524.0010146
City State Zip Code Shawnee Mission KS 66212-6184	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer American Hearing AID, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1610 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. T. W. Wilson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address PO Box 877		<b>Transaction ID:</b> IE060524.0010147	
City Montreat	State NC	Zip Code 28757-0877	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Tony P. Whittall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 2524 E Florida Ave		<b>Transaction ID:</b> IE060524.0010152	
City Hemet	State CA	Zip Code 92544-4835	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Anchor Ventures	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Audrey L. Boise		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 17 Hillcrest Ave		<b>Transaction ID:</b> IE060524.0010155	
City Summit	State NJ	Zip Code 07901-2010	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1611 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Florence W. Russell

Mailing Address 1855 Old Willow Rd  
Unit 333

City Northfield State IL Zip Code 60093-2918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 24 / 2006

Transaction ID: IE060524.0010156

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter Wenzel

Mailing Address 2801 Florida Ave Ste 14  
Ste. 14

City Miami State FL Zip Code 33133-1903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wenzel Investment Group Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 24 / 2006

Transaction ID: IE060524.0010157

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Forest Shely

Mailing Address 407 Lakeview Dr

City Campbellsville State KY Zip Code 42718-1637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 24 / 2006

Transaction ID: IE060524.0010158

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1612 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Dan Steffes</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address N7900 Locust Ln		<b>Transaction ID:</b> IE060524.0010159	
City State Zip Code Mount Calvary WI 53057	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Badger Well Drilling	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Judy M. Pavlick</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 780 Goodrich Ave		<b>Transaction ID:</b> IE060524.0010163	
City State Zip Code Saint Paul MN 55105-3343	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. William Hancock</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 75 Green Peak Orch		<b>Transaction ID:</b> IE060524.0010172	
City State Zip Code East Dorset VT 05253-9617	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1613 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Isabell Lydecker		Date of Receipt MM / DD / YYYY 05 / 24 / 2006
Mailing Address 775 W 49th St		<b>Transaction ID:</b> IE060524.0010174
City Miami Beach	State FL	Zip Code 33140-2603
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer Isabell Fischer LLC	Occupation Veterinarian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Gary H. Kent		Date of Receipt MM / DD / YYYY 05 / 24 / 2006
Mailing Address 2950 S Rancho Dr Ste 200A		<b>Transaction ID:</b> IE060524.0010175
City Las Vegas	State NV	Zip Code 89102-0740
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer Gary H Kent Inc.	Occupation Appraiser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ronald T. McDevitt		Date of Receipt MM / DD / YYYY 05 / 24 / 2006
Mailing Address 7404 N Atlantic Ave		<b>Transaction ID:</b> IE060524.0010177
City Cape Canaveral	State FL	Zip Code 32920-3725
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 300.00
Name of Employer United Agencies Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1614 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Jerry R. Burnett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address <b>453 Green Springs Hwy PO Box 19277</b>		<b>Transaction ID: IE060524.0010180</b>
City <b>Birmingham</b>	State <b>AL</b>	Zip Code <b>35209-4921</b>
Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self (state Farm Agency) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation <b>Insurance Agent</b> Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. John Garrett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address <b>1152 E Putnam Ave</b>		<b>Transaction ID: IE060524.0010181</b>
City <b>Riverside</b>	State <b>CT</b>	Zip Code <b>06878-1424</b>
Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer John Garrett Clu Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation <b>Insurance Agent</b> Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Dr. Brent Lundberg</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address <b>684 W Center St</b>		<b>Transaction ID: IE060524.0010183</b>
City <b>Midvale</b>	State <b>UT</b>	Zip Code <b>84047-7124</b>
Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Brent Lundberg DMD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation <b>Owner</b> Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1615 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Dee Batiato</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 329 Nokomis Ave S		<b>Transaction ID:</b> IE060524.0010185	
City State Zip Code Venice FL 34285-2418	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Vascular Diagnostic Clinic of Venice	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Leslie Bland</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1025 Western Ave		<b>Transaction ID:</b> IE060525.0010001	
City State Zip Code Vallejo CA 94591-5528	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lb. Plumbing	Occupation Plumber		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Karen Cooper</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 920 Wyoming Ave Ste 204		<b>Transaction ID:</b> IE060525.0010005	
City State Zip Code Kingston PA 18704-3953	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Karen Cooper MD PC Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1616 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Larry L. Strough</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address PO Box 1049		<b>Transaction ID:</b> IE060525.0010006	
City Saint Johns	State AZ	Zip Code 85936-1049	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Crawford, Hayes & Strough	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Kathryn M. Autrey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 2100 S Triviz Dr Ste H		<b>Transaction ID:</b> IE060525.0010008	
City Las Cruces	State NM	Zip Code 88001-0601	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Kathryn M. Autrey CNM, PC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Diane Parsley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 605 Hickory St		<b>Transaction ID:</b> IE060525.0010009	
City Red Bluff	State CA	Zip Code 96080-2760	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Parsley's Pest & Weed Control	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1617 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Eric Hayes

Mailing Address 480 S 6th St

City State Zip Code  
Springfield NE 68059-5861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hayes Plumbing Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010010

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jim Lee

Mailing Address 300 N Lee Blvd

City State Zip Code  
Prescott AZ 86301-5710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lee Ltd. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010011

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Shawn J. Tszanz

Mailing Address 16361 W Blair Rd

City State Zip Code  
Taylor WI 54659

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Tszanz & Sons Constructi- on LLC President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010014

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1700.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1618 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Conrado Tojino, Jr.

Mailing Address 600 Stony Brook Ct

City State Zip Code  
Newburgh NY 12550-6524

FEC ID number of contributing federal political committee. **C**

Name of Employer Tojino Conrado Do Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010018

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Christopher Holden

Mailing Address 438 E Katella Ave Ste B

City State Zip Code  
Orange CA 92867-4857

FEC ID number of contributing federal political committee. **C**

Name of Employer Christopher Holden MD Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010019

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Olympia Cummings

Mailing Address 2606 Stark Ln

City State Zip Code  
North Charleston SC 29405-5537

FEC ID number of contributing federal political committee. **C**

Name of Employer Cummings Residential Home Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010020

Amount of Each Receipt this Period  
350.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1619 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Anne Schroer

Mailing Address 115 SE 7th St

City State Zip Code  
Topeka KS 66603-3901

FEC ID number of contributing federal political committee. **C**

Name of Employer Schroer Gene E Atty. at Law  
Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010021

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Debbie Douglass

Mailing Address 207 21st St

City State Zip Code  
Bakersfield CA 93301-4118

FEC ID number of contributing federal political committee. **C**

Name of Employer Douglass & Associates Real Estate  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010024

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Gloria Castanares

Mailing Address 599 S Barranca Ave Ste 217

City State Zip Code  
Covina CA 91723-2785

FEC ID number of contributing federal political committee. **C**

Name of Employer Tamaraw Realty  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010025

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1620 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Linda Miller

Mailing Address 32 Brookwood Dr

City State Zip Code  
Ormond Beach FL 32174-5929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Linda Miller Realty Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: IE060525.0010026

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Esfandiar Fatehyar

Mailing Address 1501 S Sutro Ter

City State Zip Code  
Carson City NV 89706-0355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Western Servo Design Inc President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: IE060525.0010027

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Joanna Y. Yao

Mailing Address 1706 S Jefferson St

City State Zip Code  
Perry FL 32348-5611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pediatric & Family Medicine Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
850.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: IE060525.0010028

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1621 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Archibald M. McColl		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 82 Hummock Pond Rd		<b>Transaction ID:</b> IE060525.0010029
City State Zip Code Nantucket MA 02554-2617	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Highland Automotive Service	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Joseph Caldwell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 8459 S Cottage Grove Ave		<b>Transaction ID:</b> IE060525.0010033
City State Zip Code Chicago IL 60619-6113	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Tailo-Rite Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Donald V. Etzel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address PO Box 1848		<b>Transaction ID:</b> IE060525.0010037
City State Zip Code Wilsonville OR 97070-1848	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Prime Financial Group Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1622 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Billy C. Newton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 1251 Georgetown Rd		<b>Transaction ID:</b> IE060525.0010039
City State Zip Code Lexington KY 40511-1067	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Southern Industrial LLC Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John F. Jennings		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 114 E Main St		<b>Transaction ID:</b> IE060525.0010040
City State Zip Code Mt Sterling IL 62353-1326	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Jennings Brother Of Illinois Inc Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert F. Lutes		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 5518 N State St		<b>Transaction ID:</b> IE060525.0010041
City State Zip Code Fresno CA 93722-2518	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Valley Housing & Economic Development Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	475.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1623 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Thomas Jolly		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 5252 E 82nd St Ste 201 Ste. 201		Transaction ID: IE060525.0010045 Amount of Each Receipt this Period 300.00
City Indianapolis State IN Zip Code 46250-5704		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Architects Forum Occupation Principal	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Dolly Champey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 Avenue Of Champions Ste 115		Transaction ID: IE060525.0010046 Amount of Each Receipt this Period 300.00
City Palm Beach Gardens State FL Zip Code 33418-3600		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PGA Credit Union Occupation President	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Randy L. Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 2215 W Hanford Rd		Transaction ID: IE060525.0010047 Amount of Each Receipt this Period 500.00
City Burlington State NC Zip Code 27215-7014		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Davis Harley Davidson Occupation President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1624 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Timothy L. Hogue		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 5220 Scottsville Rd		<b>Transaction ID:</b> IE060525.0010048	
City State Zip Code Bowling Green KY 42104-7905	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Heritage Creek Construction Group	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Rebecca A. Coleman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 29707 County Road 561		<b>Transaction ID:</b> IE060525.0010049	
City State Zip Code Tavares FL 32778-9451	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Colemans Christian Daycare Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Linda L. Manderfeld		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 680 N Lake Shore Dr Suite-917		<b>Transaction ID:</b> IE060525.0010050	
City State Zip Code Chicago IL 60611-4546	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lee-Perfect Transcribing Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1625 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Nancy G. McDonald		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 2649 Britt Rd		<b>Transaction ID:</b> IE060525.0010051	
City State Zip Code Mount Dora FL 32757-9727	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N G M Productions Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Debra S. Finney		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1631 Creekside Dr Ste 103		<b>Transaction ID:</b> IE060525.0010052	
City State Zip Code Folsom CA 95630-3820	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Debra S Finney MS DDS	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Terry H. Wilmotte		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1934 Retaw St		<b>Transaction ID:</b> IE060525.0010053	
City State Zip Code Jacksonville FL 32210-3134	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer North American Aquatics Design Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1626 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Bernard R. Mehalick</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address <b>892 US Highway 22</b> FI 1		<b>Transaction ID: IE060525.0010055</b>	
City <b>Somerville</b>	State <b>NJ</b>	Amount of Each Receipt this Period 250.00	
Zip Code <b>08876-1560</b>		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Mehalick Insurance Agency	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) <b>B. J.Gary Guterman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address <b>PO Box 319</b>		<b>Transaction ID: IE060525.0010056</b>	
City <b>Sister Bay</b>	State <b>WI</b>	Amount of Each Receipt this Period 250.00	
Zip Code <b>54234-0319</b>		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Mission Grille & Gifts In-c.	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) <b>C. Mrs. Emily E. Jones</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address <b>111 W Tyler St</b>		<b>Transaction ID: IE060525.0010057</b>	
City <b>Longview</b>	State <b>TX</b>	Amount of Each Receipt this Period 250.00	
Zip Code <b>75601-6318</b>		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Law Office of Emily E Jones	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1627 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Donald O'Hare</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 17965 Lost Canyon Rd Unit 66		<b>Transaction ID:</b> IE060525.0010058	
City Canyon Country	State CA	Zip Code 91387-8314	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Quality Home Infusion	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Deborah Raphael</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 217 Escondido Ave Ste 4		<b>Transaction ID:</b> IE060525.0010059	
City Vista	State CA	Zip Code 92084-6170	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Main Street Financial Associates	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Timothy W. Carter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 2717 San Pablo Ave		<b>Transaction ID:</b> IE060525.0010060	
City Berkeley	State CA	Zip Code 94702-2201	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Timothy Carter Insurance	Occupation Principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1628 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Audra M. Hedman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 42340 Donna Cir		<b>Transaction ID:</b> IE060525.0010061	
City State Zip Code Soldotna AK 99669-9023	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Stone Brook Inn Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. P. Jeffrey Lowe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 430 W 20th St		<b>Transaction ID:</b> IE060525.0010062	
City State Zip Code Newton NC 28658-3732	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer P Jeffrey Lowe DMD Pa	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James R. Ayers		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 253 Corey Ave		<b>Transaction ID:</b> IE060525.0010064	
City State Zip Code St Pete Beach FL 33706-1818	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer James R Ayers CPA	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1629 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David C. Luck		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address PO Box 133		<b>Transaction ID:</b> IE060525.0010065	
City Stuyvesant Falls	State NY	Zip Code 12174-0133	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer David C Luck CPA PC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Rodrigue Camille		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 6316 Lantana Rd		<b>Transaction ID:</b> IE060525.0010066	
City Lake Worth	State FL	Zip Code 33463-6679	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Adela Stahl	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harold C. Sparks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 214 Marks Ave		<b>Transaction ID:</b> IE060525.0010068	
City Tullahoma	State TN	Zip Code 37388-6211	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer H C Sparks Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1630 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Pamela S. Roth

Mailing Address 26 Court St Ste 512

City State Zip Code  
Brooklyn NY 11242-1105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Law Office of Pamela S Roth Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010070

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Linda K. Kerce

Mailing Address 107 Sportsman Club Rd NE

City State Zip Code  
Milledgeville GA 31061-8787

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Truss Specialties Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010077

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joan M. Peterson

Mailing Address 4370 La Jolla Village Dr Ste 400

City State Zip Code  
San Diego CA 92122-1251

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Peterson Financial Concept President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010078

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1631 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Lan H. Lam</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 653 E E St Ste 109		<b>Transaction ID:</b> IE060525.0010079	
City Ontario	State CA	Zip Code 91764-4257	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Royal Care Medical Center	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Harvey E. Pullen</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address PO Box 770961		<b>Transaction ID:</b> IE060525.0010080	
City Eagle River	State AK	Zip Code 99577-0961	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Northfork Rentals Maintenance	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ravi Gandhi</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1479 Airport Rd		<b>Transaction ID:</b> IE060525.0010085	
City Jacksonville	State FL	Zip Code 32218-2405	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Park And Fly	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1632 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bradley Hallam

Mailing Address 4109 Ridge Rd

City Aliquippa State PA Zip Code 15001-5883

FEC ID number of contributing federal political committee. **C**

Name of Employer: Bradley Hallam Construction  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010086

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David Bensoussan

Mailing Address 149 Yellowbrook Rd Ste 111

City Farmingdale State NJ Zip Code 07727-3593

FEC ID number of contributing federal political committee. **C**

Name of Employer: Arcadian Financial Group Llc  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010087

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Martin A. Kassan, MD

Mailing Address 617 23rd St Ste 7 Ste 7

City Ashland State KY Zip Code 41101-2845

FEC ID number of contributing federal political committee. **C**

Name of Employer: Martin Kassan M.d.  
Occupation: Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010091

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1633 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Thaddeus Q. Pham		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 17220 Newhope St Ste 214 Ste. 205		<b>Transaction ID:</b> IE060525.0010093
City State Zip Code Fountain Valley CA 92708-4287	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pacific Western University Of Ca	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Karen V. Santaniello		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 1611 La Loma Dr		<b>Transaction ID:</b> IE060525.0010094
City State Zip Code Santa Ana CA 92705-3067	Amount of Each Receipt this Period 1666.67	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer No Limits Fsg Llc	Occupation Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2666.67	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David A. Joenk		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 3813 Country Club Rd		<b>Transaction ID:</b> IE060525.0010095
City State Zip Code Zebulon NC 27597-9155	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Global Communications Gro	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6666.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1634 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Richard R. Gartner, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 900 Ritchie Hwy Ste 103 Ste 103		<b>Transaction ID:</b> IE060525.0010096	
City State Zip Code Severna Park MD 21146-4190	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Dentist Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Linda B. Elliott		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 586 Amber Hill Cir		<b>Transaction ID:</b> IE060525.0010098	
City State Zip Code Cross Hill SC 29332-5055	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lakelands Trucking Llc Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Candis A. Daniel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 190 Market Place Blvd		<b>Transaction ID:</b> IE060525.0010100	
City State Zip Code Knoxville TN 37922-2337	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer White Schuerman Rhodes & Burson Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Lawyer Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1635 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Carlos Munoz-Quintana

Mailing Address 5801 S US Highway 1

City State Zip Code  
Fort Pierce FL 34982-3946

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Port St. Lucie Moving & Storage

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 25 / 2006

**Transaction ID:** IE060525.0010101

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Samuel E. Ward

Mailing Address 1410 Brickyard Rd

City State Zip Code  
Chipley FL 32428-5966

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Family Health Care of Chipley

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 25 / 2006

**Transaction ID:** IE060525.0010104

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Raisa Mitelman

Mailing Address 7 Lexington Ave

City State Zip Code  
New York NY 10010-5517

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Allay Medical Care

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 25 / 2006

**Transaction ID:** IE060525.0010105

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1636 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Linda Coyne		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 621 Cape Coral Pkwy E Ste 19		<b>Transaction ID:</b> IE060525.0010106	
City State Zip Code Cape Coral FL 33904-8548	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Avlon Title Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Alice C. Lombardo		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1888 Kalakaua Ave # 104		<b>Transaction ID:</b> IE060525.0010107	
City State Zip Code Honolulu HI 96815-1510	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Beachcomber Realty Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Denise Turunen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 251 O Connor Ridge Blvd Ste 380		<b>Transaction ID:</b> IE060525.0010108	
City State Zip Code Irving TX 75038-6524	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Denise E Turunen DDS MS	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1637 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Lola Narvaez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 644 W Colonial Dr		<b>Transaction ID:</b> IE060525.0010110	
City Orlando	State FL	Zip Code 32804-7342	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Orlando Mortgage Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David H. Cox		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1243 Mission Verde Dr		<b>Transaction ID:</b> IE060525.0010116	
City Camarillo	State CA	Zip Code 93012-4141	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Arb Inc.	Occupation General Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Nalina Pillai		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 11211 Katy Fwy Ste 350		<b>Transaction ID:</b> IE060525.0010117	
City Houston	State TX	Zip Code 77079-2191	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Canam Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1638 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Alan L. Plans

Mailing Address 109 Monmouth Rd  
Fl. 6

City State Zip Code  
Monroe Township NJ 08831-8514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Liba Fabrics Corp. Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010118

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Margaret N. Eidson

Mailing Address 15334 Manchester Rd

City State Zip Code  
Ballwin MO 63011-3027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
State Farm Insurance Rep. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010119

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Timothy J. Ketelsen

Mailing Address 669 Longview Dr

City State Zip Code  
Douglas WY 82633-2755

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
J & J Analytical Services, Llc Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010120

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1639 / 2352						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David R. Graham Mailing Address 30904 State Road 52 City San Antonio State FL Zip Code 33576-8060 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> IE060525.0010122 Amount of Each Receipt this Period 500.00
Name of Employer Rack It Truck Racks Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Len A. Melton Mailing Address PO Box 69875 City Odessa State TX Zip Code 79769-0875 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> IE060525.0010125 Amount of Each Receipt this Period 250.00
Name of Employer Al-Tx Enterprises Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Paul P. Goodman Mailing Address 21 Cow Ln City Great Neck State NY Zip Code 11024-1516 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> IE060525.0010129 Amount of Each Receipt this Period 150.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1640 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary E. Adams

Mailing Address 706 Fox Dr

City State Zip Code  
Great Falls MT 59404-3843

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: IE060525.0010131

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard H. Hayward, Jr.

Mailing Address 115 Old Jewett City Rd

City State Zip Code  
Preston CT 06365-8012

FEC ID number of contributing federal political committee. **C**

Name of Employer Mashantucket Pequoti Trb. Occupation Insurance & Safety Cord.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: IE060525.0010132

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Walter C. Backus

Mailing Address 700 Federal Ave

City State Zip Code  
Houghton Lake MI 48629-9078

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: IE060525.0010133

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1641 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Todd Draper		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 3695 Osceola St		<b>Transaction ID:</b> IE060525.0010135	
City State Zip Code Denver CO 80212-1962	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Frontier	Occupation Pilot		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Peter L. Roth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 16006 Pool Canyon Rd		<b>Transaction ID:</b> IE060525.0010141	
City State Zip Code Austin TX 78734-1312	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Asia Sourcing	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Scott E. Schanzenbach		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 55 Cannonball Rd		<b>Transaction ID:</b> IE060525.0010142	
City State Zip Code Pompton Lakes NJ 07442-1705	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Creative Countertops	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1642 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Al. F. Meyer, Sr.

Mailing Address 101 W 5th Ave

City Anchorage State AK Zip Code 99501-2521

FEC ID number of contributing federal political committee. **C**

Name of Employer Amtal, Inc Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	5	/	2	0	0	6

Transaction ID: IE060525.0010143

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Miguel Cruz

Mailing Address 12240 Pigeon Pass Rd

City Moreno Valley State CA Zip Code 92557-6901

FEC ID number of contributing federal political committee. **C**

Name of Employer Farmer Boys Restaurant Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	5	/	2	0	0	6

Transaction ID: IE060525.0010144

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joy M. Gough

Mailing Address 2462 Vail Cir

City Sandy State UT Zip Code 84093-1808

FEC ID number of contributing federal political committee. **C**

Name of Employer Joyful Moments Photography Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	5	/	2	0	0	6

Transaction ID: IE060525.0010145

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1643 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. William J. Lang

Mailing Address 3622 Northcliffe Rd

City Cleveland State OH Zip Code 44118-3632

FEC ID number of contributing federal political committee. **C**

Name of Employer Artist Entertainment Corp. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010146

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Fred Gentry

Mailing Address 4200 Old Jacksboro Hwy

City Wichita Falls State TX Zip Code 76302-2718

FEC ID number of contributing federal political committee. **C**

Name of Employer Gentry Specialty Adv. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010150

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Amerson

Mailing Address 1033 Capri Cir

City Hueytown State AL Zip Code 35023-2405

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010152

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1644 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth Mann

Mailing Address 11209 14th Ave

City State Zip Code  
Flushing NY 11356-1407

FEC ID number of contributing federal political committee. **C**

Name of Employer Recon Motors Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010159

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Iversen

Mailing Address 1265 N Temperance Ave

City State Zip Code  
Clovis CA 93619-4205

FEC ID number of contributing federal political committee. **C**

Name of Employer California Steele Frame Homes Occupation Contractor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010161

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. James O. Stoffer

Mailing Address 16 Laird Ave

City State Zip Code  
Rolla MO 65401-3735

FEC ID number of contributing federal political committee. **C**

Name of Employer James O Stoffer & Associates Occupation Doctor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010165

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1645 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Douglas C. Zimmerman

Mailing Address 247 Broadway St

City State Zip Code  
Seaman OH 45679-9566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bechtel Corp. Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010167

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Kerry D. Morgan

Mailing Address 2427 Proper St

City State Zip Code  
Corinth MS 38834-5394

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Morgan Cardiovascular Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010168

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Katherine H. Smythe

Mailing Address 629 Rozelle St

City State Zip Code  
Memphis TN 38104-5081

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010169

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1646 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert S. Patterson

Mailing Address PO Box 5956

City Asheville State NC Zip Code 28813-5956

FEC ID number of contributing federal political committee. **C**

Name of Employer Rankin-patterson Oil Company Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010170

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John D. Tuohy

Mailing Address 238 Watts Ln

City Canyon Lake State TX Zip Code 78133-6401

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010171

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Joan B. Evans

Mailing Address 1758 Palmer Rd

City Lebanon State TN Zip Code 37090-8203

FEC ID number of contributing federal political committee. **C**

Name of Employer The Right Stuff Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010172

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1647 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Frank R. Franklin

Mailing Address 1304 Fairbanks Dr

City State Zip Code  
Austin TX 78752-2833

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: IE060525.0010173

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Diane M. Lucido

Mailing Address PO Box 4260

City State Zip Code  
Wichita Falls TX 76308-0260

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Sales Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: IE060525.0010174

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Jeanna A. Smith

Mailing Address PO Box 6723

City State Zip Code  
Paris TX 75461-6723

FEC ID number of contributing federal political committee. **C**

Name of Employer Premiere Home Care Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5500.00

Date of Receipt  
05 / 25 / 2006

Transaction ID: IE060525.0010176

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1648 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth Avendano

Mailing Address 2425 Presidential Way Apt 205  
Apt 205

City State Zip Code  
West Palm Beach FL 33401-1303

FEC ID number of contributing federal political committee. **C**

Name of Employer Elizabeth Interior Decorator  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2650.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010178

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Randall Coon

Mailing Address 5564 Ottawa River Rd

City State Zip Code  
Toledo OH 43611-2258

FEC ID number of contributing federal political committee. **C**

Name of Employer Funeral Director Service  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010183

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Olga Silina

Mailing Address 7401 17th Ave Ste A

City State Zip Code  
Brooklyn NY 11204-5602

FEC ID number of contributing federal political committee. **C**

Name of Employer Seven Colors Inc.  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: IE060525.0010186

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1649 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Dale K. Johns		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 928 Mar Walt Dr Ste 101		<b>Transaction ID:</b> IE060525.0010187	
City State Zip Code Fort Walton Beach FL 32547-6706	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dale K Johns MD Pa	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Janet M. Dunn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1795 E Highway 108		<b>Transaction ID:</b> IE060525.0010191	
City State Zip Code Columbus NC 28722	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gaming Tickets Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael T. Corbeille		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 6450 W Forest Home Ave Ste 101		<b>Transaction ID:</b> IE060525.0010192	
City State Zip Code Milwaukee WI 53220-2402	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Quality Appraisal Enterprises LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1650 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Connie Boylen</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 14 S Main St Ste 3		<b>Transaction ID:</b> IE060525.0010194	
City Munroe Falls	State OH	Zip Code 44262-1698	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hair & Nail Hut LLC	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Brian Birdwell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 307 Bonanza Way		<b>Transaction ID:</b> IE060525.0010195	
City Las Vegas	State NV	Zip Code 89101-2013	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Intl. Service Solution	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. James J. Shen</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 620 Clark Ave		<b>Transaction ID:</b> IE060525.0010204	
City Pittsburg	State CA	Zip Code 94565-5000	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Viking Industrial Corp.	Occupation Vice President of Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1651 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Robert L. Carter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 694 Remington Dr Ste B		<b>Transaction ID:</b> IE060525.0010205
City State Zip Code Las Vegas NV 89110-3818	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Occupation Self	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Dora R. Santarelli		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 N 3rd St		<b>Transaction ID:</b> IE060525.0010206
City State Zip Code Minersville PA 17954-1306	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Medfocus Occupation Consultant	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Lionel L. Gorbaty		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 14200 Nadine St		<b>Transaction ID:</b> IE060525.0010212
City State Zip Code Oak Park MI 48237-6929	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self Occupation Doctor	Aggregate Year-to-Date ▼ 1300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1652 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Sabuj Hossain

Mailing Address 1233 Broadway

City State Zip Code  
New York NY 10001-4305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nuzhat Usa Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010214

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Albert R. Schallmuller

Mailing Address 6924 S Clarkson St

City State Zip Code  
Centennial CO 80122-1220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2006

Transaction ID: IE060525.0010216

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Southworth

Mailing Address 324 1/2 Henry St

City State Zip Code  
Lexington KY 40508-1215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fishel Technologies PvpI Operations Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010001

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1653 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David T. Boothe

Mailing Address PO Box 256

City State Zip Code  
Waterville OH 43566-0256

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Allstates Refractory Contractors

Occupation  
President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010002

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Ruby Jametsky

Mailing Address PO Box 1163

City State Zip Code  
Elma WA 98541-1163

FEC ID number of contributing federal political committee. **C**

Name of Employer  
J & B Enterprises

Occupation  
Ceo

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010007

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John L. Jones, CPA

Mailing Address PO Box 1537

City State Zip Code  
Hopkinsville KY 42241-1537

FEC ID number of contributing federal political committee. **C**

Name of Employer  
John L. Jones, Cpa Pllc

Occupation  
Owner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010008

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	475.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1654 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Chip Mercer

Mailing Address 725 N Fielder Rd Ste B

City State Zip Code  
Arlington TX 76012-4663

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fielder Dental Associates Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010009

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. J. Fredrick

Mailing Address 3488 Bethlehem St

City State Zip Code  
Fort Worth TX 76111-1924

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Weldon Manufacturing Co. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010010

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Elier J. Rodriguez

Mailing Address 635 NW 4th Ave

City State Zip Code  
Fort Lauderdale FL 33311-7322

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RPG Pro. Parts President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010011

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 750.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1655 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Victoria E. Miele		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 157 Foreside Rd		Transaction ID: IE060526.0010012	
City Falmouth	State ME	Zip Code 04105-1723	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Don Croff		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 3200 E Airport Way		Transaction ID: IE060526.0010014	
City Long Beach	State CA	Zip Code 90806-2408	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer H & H Wilson Sales Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Tim Adams		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 2700 N O Connor Rd Ste 138		Transaction ID: IE060526.0010015	
City Irving	State TX	Zip Code 75062-5686	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ustaxco	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1656 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Ross A. Perry</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1015 S Harrison St		<b>Transaction ID: IE060526.0010019</b>	
City State Zip Code Mc Gregor TX 76657-2039	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Avinash Desai</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 2275 8th St NW		<b>Transaction ID: IE060526.0010020</b>	
City State Zip Code Winter Haven FL 33881-1331	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Y S Enterprises Dba Super 8 Mo	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2650.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Lance Taylor</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 5105 Paulsen St Ste 216		<b>Transaction ID: IE060526.0010024</b>	
City State Zip Code Savannah GA 31405-4615	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer United American Insurance Co.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1657 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Lillian Yee Lay

Mailing Address 13922 Imperial Hwy

City State Zip Code  
La Mirada CA 90638-1725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
La Mirada Family Dentist Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010025

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Hamed Hejran

Mailing Address 6303 Owensmouth Ave  
FI 10

City State Zip Code  
Woodland Hills CA 91367-2262

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Vistaquest Corp. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010029

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jimmy B. Porter

Mailing Address PO Box 347

City State Zip Code  
Mexia TX 76667-0347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Porter Funeral Home Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010030

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1658 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Rebecca York

Mailing Address 3741 Wilder Rd Ste D

City State Zip Code  
Bay City MI 48706-2343

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rebecca M. York, Dc Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010031

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Emerson R. Tracy

Mailing Address 3000 W Brigantine Ave

City State Zip Code  
Brigantine NJ 08203-1740

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Emerson R Tracy Od Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010032

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Linda O'Donnell

Mailing Address 2329 W Belmont Ave

City State Zip Code  
Chicago IL 60618-6422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ReMax Signature Broker

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010033

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 700.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1659 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Onsi A. Habeeb-Elzayat

Mailing Address 1020 S Anaheim Blvd  
Ste 214

City State Zip Code  
Anaheim CA 92805-5808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Onsi Habeeb-elzaya Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 751.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010034

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Heather L. McGuinness

Mailing Address 524 W Main Ave

City State Zip Code  
Spokane WA 99201-0510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Heart Shaped Face Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010035

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Bruce R. Bryan

Mailing Address 333 E Onondaga St  
Ste 600

City State Zip Code  
Syracuse NY 13202-2011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bruce R Bryan Atty. at Law Lawyer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010036

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1660 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Daniel Curry		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 5841 S Maryland Ave		<b>Transaction ID:</b> IE060526.0010037	
City Chicago	State IL	Amount of Each Receipt this Period 300.00	
Zip Code 60637-1447			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Univ. Physicians Group	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Mady Y. Fingeret		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 8333 W McNab Rd Ste 131		<b>Transaction ID:</b> IE060526.0010038	
City Tamarac	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 33321-3203			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Finger & Fingeret Pa	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Barney Bates		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 188 Hospital Ln		<b>Transaction ID:</b> IE060526.0010042	
City Jellico	State TN	Amount of Each Receipt this Period 500.00	
Zip Code 37762-4400			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jellico Ambulance	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1661 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Samuel E. Newey

Mailing Address 720 Oaks Field Rd

City State Zip Code  
Jacksonville FL 32211-7317

FEC ID number of contributing federal political committee. **C**

Name of Employer Sam Newey Realty Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010045

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Harold O. Thomas

Mailing Address 8000 Calender Rd

City State Zip Code  
Arlington TX 76001-7758

FEC ID number of contributing federal political committee. **C**

Name of Employer General Electro Dynamics Corp. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010047

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Allyson Coe

Mailing Address 6151 Fm 1830

City State Zip Code  
Argyle TX 76226-5084

FEC ID number of contributing federal political committee. **C**

Name of Employer Keller Williams Realty Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010049

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1662 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard A. Laroche		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 5830 W Gordonville Rd		Transaction ID: IE060526.0010050	
City State Zip Code Shepherd MI 48883-9217	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Finishing Touch Mobile Homes	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James Lenihan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 235 Main St 5th Fl		Transaction ID: IE060526.0010055	
City State Zip Code White Plains NY 10601-2418	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lenihan & Associates LLC	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Eleanor C. Paradee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 318 N State St		Transaction ID: IE060526.0010056	
City State Zip Code Dover DE 19901-3839	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1663 / 2352  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Christian R. Delrosario

Mailing Address 280 Watergate Dr

City State Zip Code  
Roswell GA 30076-3254

FEC ID number of contributing federal political committee. **C**

Name of Employer Summitlink. Com. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010058

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Juan Lopez

Mailing Address 21 Sherman Ave Ste 1

City State Zip Code  
New York NY 10040-1815

FEC ID number of contributing federal political committee. **C**

Name of Employer Juan Lopez MD Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010059

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Alexander Salazar

Mailing Address 520 2nd Ave Apt 7A

City State Zip Code  
New York NY 10016-8661

FEC ID number of contributing federal political committee. **C**

Name of Employer Intermark Mktg. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010063

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1664 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David J. Orazietti

Mailing Address 441 Howe Ave

City State Zip Code  
Shelton CT 06484-3196

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Downtown Danyo's Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010064

Amount of Each Receipt this Period  
1250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bobby Brock

Mailing Address 6150 Roberts Matthews Hwy

City State Zip Code  
Sparta TN 38583-5231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dci Transportation LLC CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010065

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rhonda R. Raymond

Mailing Address 3159 Lauderdale Dr

City State Zip Code  
Richmond VA 23233-7801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rhonda's Barbershop Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010070

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1665 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Gail H. Wilson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 3685 Old Petersburg Rd Ste 150		<b>Transaction ID:</b> IE060526.0010072
City Augusta State GA Zip Code 30907-0872	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Export Insurance Service Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Paula I. Kapec		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 809 Summit Ave		<b>Transaction ID:</b> IE060526.0010073
City Greensboro State NC Zip Code 27405-7833	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Kapec Paula I DDS	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Renie T. Chandler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 560 Chandler Place Dr		<b>Transaction ID:</b> IE060526.0010074
City Lavonia State GA Zip Code 30553-2115	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Renstone Bed & Breakfast & Spa	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1666 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Frederick Miller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1040 E Hill Rd Ste 3		<b>Transaction ID:</b> IE060526.0010075 Amount of Each Receipt this Period 150.00
City State Zip Code Grand Blanc MI 48439-4800	FEC ID number of contributing federal political committee. C	
Name of Employer Frederick Miller	Occupation Owner	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Christopher E. Aulerich		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1030 E Guadalupe Rd		<b>Transaction ID:</b> IE060526.0010078 Amount of Each Receipt this Period 375.00
City State Zip Code Tempe AZ 85283-3044	FEC ID number of contributing federal political committee. C	
Name of Employer Brady-Aulerich & Associates	Occupation President	Amount of Each Receipt this Period 750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Forest E. Tyson, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 4435 Prospect Ave		<b>Transaction ID:</b> IE060526.0010080 Amount of Each Receipt this Period 150.00
City State Zip Code Kansas City MO 64130-1954	FEC ID number of contributing federal political committee. C	
Name of Employer Tycon Co.	Occupation Owner	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	675.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1667 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael Garthright, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 2414 Sunset Dr		<b>Transaction ID:</b> IE060526.0010083	
City State Zip Code Clinton OK 73601-2902	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Consolidated Oil Field Rental Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jeffery W. Hamilton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 760		<b>Transaction ID:</b> IE060526.0010085	
City State Zip Code Chowchilla CA 93610-0760	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Minturn Huller Cooperative Inc	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Charlene Waddell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 102 Memorial Dr		<b>Transaction ID:</b> IE060526.0010086	
City State Zip Code Greer SC 29650-1517	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Greer Tax & Bookkeeping Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1668 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Brenda Bailey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 470 Manchester Square Shpg Ctr		<b>Transaction ID:</b> IE060526.0010087	
City Manchester	State KY	Amount of Each Receipt this Period 250.00	
Zip Code 40962-8781		FEC ID number of contributing federal political committee. C	
Name of Employer A B Disability Associates	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) <b>B. Mr. Jesse R. King</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 6 Ripple Pl		<b>Transaction ID:</b> IE060526.0010088	
City Palm Coast	State FL	Amount of Each Receipt this Period 150.00	
Zip Code 32164-6514		FEC ID number of contributing federal political committee. C	
Name of Employer Realty Executives	Occupation Sales Representative	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 300.00			

Full Name (Last, First, Middle Initial) <b>C. Ms. Teresa Blankenship</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 1474		<b>Transaction ID:</b> IE060526.0010089	
City Portsmouth	State OH	Amount of Each Receipt this Period 250.00	
Zip Code 45662-1474		FEC ID number of contributing federal political committee. C	
Name of Employer Buckeye Bail Bonds LLC	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1669 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Lisha A. Marsh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1794 Marshall Rd		<b>Transaction ID:</b> IE060526.0010090	
City State Zip Code Wetumpka AL 36093-3601	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LG LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Daniel H. Williams</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 503 Town Ctr N		<b>Transaction ID:</b> IE060526.0010092	
City State Zip Code Mc Cormick SC 29835-9652	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Savannah Lake Realestate Group Llc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Jerry Miller</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 7709 Kendrick Crossing Ln		<b>Transaction ID:</b> IE060526.0010094	
City State Zip Code Louisville KY 40291-5035	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Old Reliable Products & Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1670 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Jeffrey A. Price</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 380 Vanhook Ct		<b>Transaction ID:</b> IE060526.0010098	
City Somerset      State KY      Zip Code 42503-4920	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Premier Equipment Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Connie Jordan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 32401 Calle Perfecto		<b>Transaction ID:</b> IE060526.0010102	
City San Juan Capistran      State CA      Zip Code 92675-4773	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Xs Network Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Barbara J. Walton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 441 Dylan Dr		<b>Transaction ID:</b> IE060526.0010103	
City Port Orange      State FL      Zip Code 32127-6737	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Barbaras Baubles	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1671 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. William Brayman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 24 Mowry Ave		<b>Transaction ID:</b> IE060526.0010105	
City Norwich	State CT	Amount of Each Receipt this Period 150.00	
Zip Code 06360-3305		FEC ID number of contributing federal political committee. C	
Name of Employer Brayman Heating & Cooling Inc	Occupation Owner	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Charles Deiner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 19296 SW 96th Loop		<b>Transaction ID:</b> IE060526.0010106	
City Dunnellon	State FL	Amount of Each Receipt this Period 300.00	
Zip Code 34432-4200		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Richard Rosenthal		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 6050 Peachtree Pkwy Ste 240-216		<b>Transaction ID:</b> IE060526.0010109	
City Norcross	State GA	Amount of Each Receipt this Period 300.00	
Zip Code 30092-3336		FEC ID number of contributing federal political committee. C	
Name of Employer Rosenthal & Assoc Inc	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1672 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Robert E. Malpass, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1241 Hobbton Hwy		<b>Transaction ID:</b> IE060526.0010110
City State Zip Code Clinton NC 28328-1957	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Spivey-lewis Tire Company Inc	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Cynthia M. Cline		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2605 Deer Park Blvd		<b>Transaction ID:</b> IE060526.0010114
City State Zip Code Omaha NE 68105-3792	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer River City Barricade Co.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Donna L. Hoffman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 9601 Winchester Ave		<b>Transaction ID:</b> IE060526.0010116
City State Zip Code Bunker Hill WV 25413-4200	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Century 21 Sterling Realty	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1673 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Shirley A. Romine</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 8888 Keystone Xing Ste 1300 Suite-1300		<b>Transaction ID: IE060526.0010119</b>	
City Indianapolis	State IN	Zip Code 46240-4600	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Alliance Real-estate Group	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. George R. Watkins</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 1970		<b>Transaction ID: IE060526.0010122</b>	
City Henderson	State NC	Zip Code 27536-1970	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rose Oil Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Sandra Martin</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 159 Kingsdale Rd		<b>Transaction ID: IE060526.0010124</b>	
City Littlestown	State PA	Zip Code 17340-9754	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Martin's Care Home	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1674 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Brian D. Dodson

Mailing Address 810 Valley View Blvd

City State Zip Code  
Altoona PA 16602-6342

FEC ID number of contributing federal political committee. **C**

Name of Employer Blair Gastroenterology Associates Inc. Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010125

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. John A. Yacenda

Mailing Address 10126 Via Fiori

City State Zip Code  
Reno NV 89511-4326

FEC ID number of contributing federal political committee. **C**

Name of Employer Health Care Strategies, Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010126

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Meriana W. Gee

Mailing Address 5731 Warm Springs Rd

City State Zip Code  
Houston TX 77035-2425

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010129

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1675 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Bonnie M. Peracca</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 15 Independence Cir		<b>Transaction ID: IE060526.0010130</b>	
City State Zip Code Chico CA 95973-0251	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rush Personnel Services Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Nell Forsythe</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1620 Lillian Ave		<b>Transaction ID: IE060526.0010132</b>	
City State Zip Code Jourdanton TX 78026-1508	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Eagle Rock Excavating General Construc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Samuel K. Ward</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 106 E Adams St Ste 212		<b>Transaction ID: IE060526.0010133</b>	
City State Zip Code Carson City NV 89706-3081	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Samuel K Ward Appraiser	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1676 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Donald L. Schleicher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 210 S Bluemound Dr		Transaction ID: IE060526.0010134	
City Appleton	State WI	Amount of Each Receipt this Period 300.00	
Zip Code 54914-3924		FEC ID number of contributing federal political committee. C	
Name of Employer Lifetime Retirement Planning I	Occupation Planner	Aggregate Year-to-Date ▼ 550.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jason Wright		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1105 Meadow Ln		Transaction ID: IE060526.0010135	
City Lexington	State KY	Amount of Each Receipt this Period 150.00	
Zip Code 40505-2613		FEC ID number of contributing federal political committee. C	
Name of Employer Self	Occupation Mechanic	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Scott Billings		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 11202 Steele St S		Transaction ID: IE060526.0010136	
City Lakewood	State WA	Amount of Each Receipt this Period 300.00	
Zip Code 98499-8897		FEC ID number of contributing federal political committee. C	
Name of Employer Steele Street 76	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1677 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Shirley Garcia</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 9789 Baseline Rd		<b>Transaction ID: IE060526.0010139</b>	
City State Zip Code Rancho Cucamonga CA 91730-1408	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Nancys Hallmark Shop	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jesus Valencia</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1124 Coolidge Ave		<b>Transaction ID: IE060526.0010140</b>	
City State Zip Code National City CA 91950-3227	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Valencia Stone Tile	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Shang Dai</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 13618 39th Ave Ste 1102		<b>Transaction ID: IE060526.0010142</b>	
City State Zip Code Flushing NY 11354-5516	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dai & Associates PC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1678 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jay A. Schall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1537 Liberty St B		<b>Transaction ID:</b> IE060526.0010147
City Easton	State PA	Zip Code 18042-3162
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00
Name of Employer Eastern Hosp	Occupation Radiology Aide	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Ronnie Mobley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 639		<b>Transaction ID:</b> IE060526.0010148
City Haleyville	State AL	Zip Code 35565-0639
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 75.00
Name of Employer Naifast Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. John Crooch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 4201 N Classen Blvd		<b>Transaction ID:</b> IE060526.0010149
City Oklahoma City	State OK	Zip Code 73118-2415
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00
Name of Employer Oklahoma United Methodist Foundation	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	675.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1679 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Arvind Joshi		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 740 Driving Park Ave		<b>Transaction ID:</b> IE060526.0010153	
City State Zip Code Rochester NY 14613-1534	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hercules Glove Mfg. Co., Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Col. John H. Ford, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 8 Lundy Ln		<b>Transaction ID:</b> IE060526.0010155	
City State Zip Code Bella Vista AR 72714-1629	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Thomas Crawford		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 27120 Ocean Gtwy		<b>Transaction ID:</b> IE060526.0010156	
City State Zip Code Hebron MD 21830-1041	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Machining Technologies In-c.	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1680 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jadian U. Altemus

Mailing Address 4358 Powderhorn Dr

City San Diego State CA Zip Code 92154-1722

FEC ID number of contributing federal political committee. **C**

Name of Employer Network Dominance Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: IE060526.0010165

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Valdie Jackson

Mailing Address 9888 Bissonnet St Ste 320

City Houston State TX Zip Code 77036-8290

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Cmprhnsive Health Resources Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: IE060526.0010166

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Maria Krivoshlikoff

Mailing Address PO Box 1266

City Brookline State MA Zip Code 02446-0010

FEC ID number of contributing federal political committee. **C**

Name of Employer Maria Krivoshlikoff Dds Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: IE060526.0010168

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1681 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Barbara D. Scott

Mailing Address 3849 Cypress Club Dr

City State Zip Code  
Charlotte NC 28210-2470

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010169

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John G. Orta

Mailing Address 1532 127th St

City State Zip Code  
Flushing NY 11356-2332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Classic Labels Ceo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010172

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Carl D. Hare

Mailing Address 119 S Polk St

City State Zip Code  
Amarillo TX 79101-1423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nunn Electric Supply Corp. Ceo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: IE060526.0010173

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1682 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Jorge A. Alonso</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 500 W 49th St Ste K		<b>Transaction ID: IE060526.0010174</b>	
City State Zip Code Hialeah FL 33012-3605	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer South Pacific Professional Insu	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Peng T. Ong</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1065 E Hillsdale Blvd		<b>Transaction ID: IE060526.0010176</b>	
City State Zip Code Foster City CA 94404-1613	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Encentuate Inc.	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Susan K. Isaac</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 4855 Atherton Ave Ste 201		<b>Transaction ID: IE060526.0010177</b>	
City State Zip Code San Jose CA 95130-1026	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Isaac Susan K LMFT	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1683 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Larry L. Monroe		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 477		<b>Transaction ID:</b> IE060526.0010178	
City State Zip Code Sonora TX 76950-0477	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Monroe Welding	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Elizabeth M. Attreed		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 2832 Jefferson Davis Hwy		<b>Transaction ID:</b> IE060526.0010182	
City State Zip Code Stafford VA 22554-1735	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Elizabeth M. Attreed DDS PC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Linda Martin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 7135 Crested Quail		<b>Transaction ID:</b> IE060526.0010183	
City State Zip Code San Antonio TX 78250-7212	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Martins Home Works	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1684 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Elias F. Conring

Mailing Address 21328 Penola Rd

City State Zip Code  
Ruther Glen VA 22546-3908

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Conring Precision Weapon Systems

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010185

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph T. Vicente

Mailing Address 19424 Chamblee Ave

City State Zip Code  
Cerritos CA 90703-6775

FEC ID number of contributing federal political committee. **C**

Name of Employer  
J & L Consulting LLC

Occupation  
Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010187

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Charlene Keys

Mailing Address 23630 SE 440th St

City State Zip Code  
Enumclaw WA 98022-8491

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Keys Research

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010189

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1685 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Pamela S. Harrold

Mailing Address 382 G C And P Rd

City State Zip Code  
Wheeling WV 26003-6135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Harrold Pamela DVM Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010192

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bill Roberts

Mailing Address 6550 Odessa Ave

City State Zip Code  
Van Nuys CA 91406-6517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Van Nuys Golf Course Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010193

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel G. Puckett

Mailing Address 1748 John Call Rd

City State Zip Code  
Talking Rock GA 30175-5543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dan's Plumbing Repair Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010194

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1100.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1686 / 2352  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bill Clonts

Mailing Address 2070 Attic Pkwy NW Ste 505

City State Zip Code  
Kennesaw GA 30152-7625

FEC ID number of contributing federal political committee. **C**

Name of Employer Tru Line Surveying Inc  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010197

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Glenda Partridge

Mailing Address 202 Sharon Rd

City State Zip Code  
Arcadia CA 91007-8043

FEC ID number of contributing federal political committee. **C**

Name of Employer Arcadia Escrow Services Inc.  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010198

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Thelma B. Julien

Mailing Address 225 Country Club Dr  
Apt C327

City State Zip Code  
Largo FL 33771-2251

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired  
Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: IE060526.0010199

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1687 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Irma Matos</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 660033		<b>Transaction ID:</b> IE060526.0010202	
City Miami Springs	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 33266-0033		FEC ID number of contributing federal political committee. C	
Name of Employer TPS Mgmt.	Occupation President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Dr. Patrick J. Droste</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 5050 Cascade Rd SE		<b>Transaction ID:</b> IE060526.0010203	
City Grand Rapids	State MI	Amount of Each Receipt this Period 300.00	
Zip Code 49546-3725		FEC ID number of contributing federal political committee. C	
Name of Employer Pediatric Ophthalmology PC	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. George E. Davies</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 440 Premier Cir		<b>Transaction ID:</b> IE060526.0010205	
City Charlottesville	State VA	Amount of Each Receipt this Period 300.00	
Zip Code 22901-1724		FEC ID number of contributing federal political committee. C	
Name of Employer Premier Properties Real Estate	Occupation Ceo	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1688 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Stephen M. Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 7835		<b>Transaction ID:</b> IE060526.0010206	
City Waco	State TX	Zip Code 76714-7835	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Imperial Woodworks Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Shelly Lindekugel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 12125 Day St Ste E301		<b>Transaction ID:</b> IE060526.0010210	
City Moreno Valley	State CA	Zip Code 92557-6704	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Silvercrest Realty	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Bernadette M. Brown		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 894 Summit St Ste 108		<b>Transaction ID:</b> IE060526.0010212	
City Round Rock	State TX	Zip Code 78664-4370	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Round Rock Pediatrics	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1689 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Viviana B. Galli</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1288 Route 73 Ste 210		<b>Transaction ID: IE060526.0010214</b>	
City State Zip Code Mount Laurel NJ 08054-2237	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Butler Behavioral Health	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. James T. Giffen, Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address PO Box 566747		<b>Transaction ID: IE060526.0010220</b>	
City State Zip Code Miami FL 33256-6747	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Roger M. Pumphrey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 7481 N Navajo Rd		<b>Transaction ID: IE060526.0010221</b>	
City State Zip Code Milwaukee WI 53217-3463	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Reach Institute LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1690 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Manuel Gonzalez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1122 Country Club Blvd		<b>Transaction ID:</b> IE060526.0010222	
City State Zip Code Cape Coral FL 33990-3096	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Amigo Realty Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Nikki Nelson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 14122 Central Ave		<b>Transaction ID:</b> IE060526.0010223	
City State Zip Code Chino CA 91710-5700	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Express Printing & Graphics	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Sally Miller		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 224 Broadway St		<b>Transaction ID:</b> IE060526.0010224	
City State Zip Code San Antonio TX 78205-1924	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cash Credit Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1691 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Kelli A. Turner -Molette		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1506 Church St Ste 110		<b>Transaction ID:</b> IE060526.0010225
City Nashville State TN Zip Code 37203-3038	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Kelli A Turner DDS, PC Occupation Doctor	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Thomas Matkov		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 3811 Spring St # 302		<b>Transaction ID:</b> IE060526.0010226
City Racine State WI Zip Code 53405-1667	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer All Saints-St. Marys Medical Center Occupation Doctor	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Gina Nieves		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 12 Main St Ste 116		<b>Transaction ID:</b> IE060526.0010233
City Brewster State NY Zip Code 10509-6402	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Marknet Group Inc. Occupation President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1692 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Eugene W. Jeffres</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address <b>525 Odessa Rd</b>		<b>Transaction ID: IE060526.0010234</b>	
City <b>Elm Creek</b>	State <b>NE</b>	Amount of Each Receipt this Period 5000.00	
Zip Code <b>68836-7511</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Eugene Jeffres</b>	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Andrew M. Hall</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address <b>2915 Hewitt Ave</b>		<b>Transaction ID: IE060526.0010235</b>	
City <b>Everett</b>	State <b>WA</b>	Amount of Each Receipt this Period 300.00	
Zip Code <b>98201-3821</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Botesch Nash &amp; Hall Architects P S</b>	Occupation <b>President</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Donald R. Ramsey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address <b>PO Box 217</b>		<b>Transaction ID: IE060526.0010237</b>	
City <b>Lynn Haven</b>	State <b>FL</b>	Amount of Each Receipt this Period 300.00	
Zip Code <b>32444-0217</b>			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Innovative Consulting Inc.</b>	Occupation <b>President</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1693 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Norma Devine		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1555 W Mockingbird Ln Ste 22		<b>Transaction ID:</b> IE060526.0010239
City State Zip Code Dallas TX 75235-5019	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Results Staffing Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Luis Munoz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2280 Trawood Dr Ste B		<b>Transaction ID:</b> IE060526.0010241
City State Zip Code El Paso TX 79935-3020	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer B D M Solutions Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John Petros		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1100 Ocean Shore Blvd		<b>Transaction ID:</b> IE060526.0010242
City State Zip Code Ormond Beach FL 32176-3792	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Coldwell Banker Expert Realty	Occupation Real Estate Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1694 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Tung Pham Mailing Address 3240 Washington Ave N City State Zip Code Minneapolis MN 55412-2640 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> IE060526.0010243 Amount of Each Receipt this Period 300.00
Name of Employer Occupation Tung Pham Mfg. Consultants Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jake B. Giesbrecht Mailing Address HC 4 Box 143-1 City State Zip Code Seminole TX 79360-9306 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> IE060526.0010243 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Self Farming Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 900.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Crystal Wortman Mailing Address 4175 Brockton Ave City State Zip Code Riverside CA 92501-3442 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> IE060526.0010243 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Capo Portofino Inc. Vice President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1695 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Patrick J. Kelly		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 188 Kearny Ave Ste A		<b>Transaction ID:</b> IE060526.0010253	
City State Zip Code Kearny NJ 07032-2438	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kelly Shipping, Llc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Leif C. Lindvall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 301 Oxford Valley Rd # 505 Bldg 505		<b>Transaction ID:</b> IE060526.0010254	
City State Zip Code Yardley PA 19067-7706	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer High Tech Techonlogy Inc.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Asdghig D. Daderian		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1188 N Euclid St		<b>Transaction ID:</b> IE060526.0010256	
City State Zip Code Anaheim CA 92801-1900	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kaiser Perminente Southern Californ	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1696 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Fadi Naserdean		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 5728 Schaefer Rd		<b>Transaction ID:</b> IE060526.0010257
City Dearborn	State MI	Zip Code 48126-2298
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Advanced Pharmacyplus Inc	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John D' Auria		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 8087 Monetary Dr		<b>Transaction ID:</b> IE060530.0010001
City West Palm Bch	State FL	Zip Code 33404-1711
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1666.67
Name of Employer John D'Auria Co.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.67	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John R. Brougher, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 3017 Southwestern Blvd		<b>Transaction ID:</b> IE060530.0010003
City Dallas	State TX	Zip Code 75225-7841
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2066.67
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1697 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert E. Lee, Sr.

Mailing Address RR 2 Box 857

City State Zip Code  
Hortense GA 31543-9477

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Golded Isles Office Equip-ment Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010005

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Brien A. Martin

Mailing Address 1770 Fernbrook Ln N

City State Zip Code  
Plymouth MN 55447-4661

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wagoner Spray Tech Corp. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010007

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kevin L. Webb

Mailing Address 2700 Adams Ave

City State Zip Code  
Huntington WV 25704-1337

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Webb Truck Parts President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010009

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1698 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph M. Bushman

Mailing Address 8390 River Rd

City State Zip Code  
Wittenberg WI 54499-9624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Liberty Packing Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010012

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Antonio B. Santillano

Mailing Address 2934 Wickliffe Rd

City State Zip Code  
Berryville VA 22611-3000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010014

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Rene Mora

Mailing Address 1 Federal St  
FI 37

City State Zip Code  
Boston MA 02110-2028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Leerink Swann & Co. Chief Scientific Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010015

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1699 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Tara A. Campbell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1024 Cedar Point Blvd		<b>Transaction ID:</b> IE060530.0010019	
City State Zip Code Cedar Point NC 28584-8019	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cut Above Spa Salon	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Cheryl D. Thomas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1284 Ogden Rd Unit A		<b>Transaction ID:</b> IE060530.0010020	
City State Zip Code Venice FL 34285-5511	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Thomas & Son Glass & Mirror Inc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Suzanne C. Goldsticker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 211 11th St		<b>Transaction ID:</b> IE060530.0010025	
City State Zip Code Virginia Beach VA 23451-3508	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1700 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Raymond Gagnon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 136 Berlin Rd		<b>Transaction ID:</b> IE060530.0010026	
City State Zip Code Cromwell CT 06416-2627	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Scientech Llc	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Tom Smelser		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 6326 Constitution Dr		<b>Transaction ID:</b> IE060530.0010032	
City State Zip Code Fort Wayne IN 46804-1518	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer T A Smelser & Associates	Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Richard Cripps		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 22578 Karen Ct		<b>Transaction ID:</b> IE060530.0010033	
City State Zip Code Farmington Hills MI 48336-3740	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dick Cripps Incorporated	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1701 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Fred Deveau		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 7065 W Ann Rd Ste 130-436		Transaction ID: IE060530.0010034	
City State Zip Code Las Vegas NV 89130-3865	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Us Occupational Safety Service	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Carl N. Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 5450 S Slauson Ave		Transaction ID: IE060530.0010039	
City State Zip Code Culver City CA 90230-6062	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The Brick Group	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Steve M. Pierce		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 14000 N 7 V Ranch Rd		Transaction ID: IE060530.0010040	
City State Zip Code Prescott AZ 86305-9407	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Los Vegas Ranch	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1702 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Minh Truong

Mailing Address 5412 S Mingo Rd Ste A

City State Zip Code  
Tulsa OK 74146-5708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kwik Kopy Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** IE060530.0010043

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Delfino Hernandez

Mailing Address 2608 E Prosperity Ave

City State Zip Code  
Tulare CA 93274-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Quality Welding & Trailer Repair Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** IE060530.0010052

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gary J. Gerard

Mailing Address PO Box 426

City State Zip Code  
New Harmony IN 47631-0426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Blaffer Foundation Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** IE060530.0010054

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1703 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dean Demorrow

Mailing Address 73501 29 Palms Hwy

City State Zip Code  
Twentynine Palms CA 92277-3100

FEC ID number of contributing federal political committee. **C**

Name of Employer Demorrow's Jewelry & Repair  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010056

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph N. Rizzo, Jr.

Mailing Address 5775 Nassau Point Rd

City State Zip Code  
Cutchoque NY 11935-2778

FEC ID number of contributing federal political committee. **C**

Name of Employer Joseph N Rizzo Jr Esquire  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010058

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles Foy

Mailing Address PO Box 475

City State Zip Code  
Odebolt IA 51458-0475

FEC ID number of contributing federal political committee. **C**

Name of Employer Odebolt Arthur School District  
Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010060

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1704 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. D. C. Hobbs

Mailing Address 197 County Road 2920

City State Zip Code  
Alba TX 75410-5796

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dc Hobbs Construction LLC Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010061

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James C. Summerset

Mailing Address 5255 E Williams Cir Ste 6000

City State Zip Code  
Tucson AZ 85711-7717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Americabuilt Development Inc. Vice President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010062

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael M. Moussa

Mailing Address 360 S Main St

City State Zip Code  
Phillipsburg NJ 08865-3017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Restaurant Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010063

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1705 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Victor E. Ruybalid

Mailing Address 2451 S Buffalo Dr  
Ste 145

City Las Vegas State NV Zip Code 89117-2771

FEC ID number of contributing federal political committee. **C**

Name of Employer Liberty Realty Occupation Broker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010064

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Alan Goldberg

Mailing Address 201 Keith St SW Ste 15

City Cleveland State TN Zip Code 37311-5867

FEC ID number of contributing federal political committee. **C**

Name of Employer Recevia Inc. Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010071

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John J. Steuby

Mailing Address 6002 N Lindbergh Blvd

City Hazelwood State MO Zip Code 63042-2804

FEC ID number of contributing federal political committee. **C**

Name of Employer John J. Steuby Co. Occupation Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010074

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1706 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Lena Signor</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 5530 Almaden Expy		<b>Transaction ID:</b> IE060530.0010075	
City State Zip Code San Jose CA 95118-3605	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Alliance Title Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Fritzie Sawasky</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 5611 Scenery Rd		<b>Transaction ID:</b> IE060530.0010076	
City State Zip Code Waterford WI 53185-2928	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Delta Electric Inc. Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Anthony Sebastian, MD</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 12800 Castlerock Ct		<b>Transaction ID:</b> IE060530.0010078	
City State Zip Code Oklahoma City OK 73142-5127	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Integris Baptist Medical Center Occupation Physician-transplant Surg			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1707 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Edwin L. Hansberger		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2450 W 8th St Apt. G		<b>Transaction ID:</b> IE060530.0010079	
City Yuma	State AZ	Zip Code 85364-2708	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Roy W. Martin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address RR 2 Box 271D		<b>Transaction ID:</b> IE060530.0010080	
City Lost Creek	State WV	Zip Code 26385-9635	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer R M Building Inc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Samuel R. Hassen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1081 Cove Rd		<b>Transaction ID:</b> IE060530.0010081	
City Sevierville	State TN	Zip Code 37876-7813	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer English Mountain Condomin-iums	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1708 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Elias R. Torres

Mailing Address 115 W 7200 S

City State Zip Code  
Midvale UT 84047-3722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
El Farol Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: IE060530.0010082

Amount of Each Receipt this Period  
1250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Louis C. Hoffman

Mailing Address 4920 San Felipe St

City State Zip Code  
Houston TX 77056-3702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Brucette's Shoes Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 375.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: IE060530.0010090

Amount of Each Receipt this Period  
375.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Randy Rippin

Mailing Address 1201 Technology Dr

City State Zip Code  
Aberdeen MD 21001-1247

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rtr Technologies Llc President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: IE060530.0010091

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1925.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1709 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David D. Lowers		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 217 Dewberry Dr		<b>Transaction ID:</b> IE060530.0010098	
City Winchester	State VA	Zip Code 22602-6776	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer American Background Info. Srvs	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Paul Colvin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 9143 Greenhouse Rd		<b>Transaction ID:</b> IE060530.0010099	
City Bentonville	State AR	Zip Code 72712-8411	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Paul Colvin Trucking	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Terry F. Garrett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1605 McDonald St		<b>Transaction ID:</b> IE060530.0010102	
City Midland	State TX	Zip Code 79703-4925	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Garrett Consultants	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1710 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Mark T. Owades</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 15 High Point Rd		<b>Transaction ID: IE060530.0010105</b>	
City State Zip Code Westport CT 06880-3906		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Mto Associates Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Anthony W. Raskob</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2060 Briargate Pkwy Ste 170		<b>Transaction ID: IE060530.0010109</b>	
City State Zip Code Colorado Springs CO 80920-7660		Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Solubit Inc. Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 631.00	

Full Name (Last, First, Middle Initial) <b>C. Dr. B. S. Bohra</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 5121 Woodview Ct		<b>Transaction ID: IE060530.0010112</b>	
City State Zip Code Dearborn MI 48126-2617		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bohra MD PC Doctor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	880.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1711 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Brian K. Taylor		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 1400 Northwind Rd		<b>Transaction ID:</b> IE060530.0010114	
City State Zip Code Louisville KY 40207-1665	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Worksite Solutions LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Clarice Holden		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 101 Shoreline Dr E		<b>Transaction ID:</b> IE060530.0010115	
City State Zip Code Sunset Beach NC 28468-4236	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Island Breeze Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael D. Sammy		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 1730 Akron Peninsula Rd Ste 4		<b>Transaction ID:</b> IE060530.0010119	
City State Zip Code Akron OH 44313-7982	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Michael D Sammy Insurance Agency	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1712 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Fernando

Mailing Address 406 E Douglas St

City State Zip Code  
Oneill NE 68763-1852

FEC ID number of contributing federal political committee. **C**

Name of Employer Golden Hotel LLC Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010120

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gary Scherer

Mailing Address 8420 Palm St NW

City State Zip Code  
Coon Rapids MN 55433-5954

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010123

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert Kavale

Mailing Address 12775 Bach Ct

City State Zip Code  
Saratoga CA 95070-4001

FEC ID number of contributing federal political committee. **C**

Name of Employer Advanced Production Engineering Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010124

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1713 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael L. Schenk		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 3737 Glenwood Ave Ste 400		Transaction ID: IE060530.0010129
City Raleigh State NC Zip Code 27612-5515	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Kilpatrick Stockton LLP Occupation Attorney	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John J. Carroll		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 16 Main St Ste 18		Transaction ID: IE060530.0010131
City Chester State CT Zip Code 06412-1342	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer G. B. Stumpp & Associates Inc. Occupation President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Harvey J. Stangel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 116 Lincoln Ave		Transaction ID: IE060530.0010134
City Highland Park State NJ Zip Code 08904-1852	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1714 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William R. Mayo		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 8		Transaction ID: IE060530.0010136	
City Trexlerstown	State PA	Zip Code 18087-0008	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mayo Homes Co	Occupation Secretary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Elisha R. Morgan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 533		Transaction ID: IE060530.0010137	
City Hanover	State NH	Zip Code 03755-0533	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer New England Gem Lab	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ray S. Adams		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 76 Lowe Ave		Transaction ID: IE060530.0010138	
City Meriden	State CT	Zip Code 06450-4703	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer A-1 Associates	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1715 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Mario De La Fuente		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 11601 E Lusitano Pl		<b>Transaction ID:</b> IE060530.0010140	
City Tucson	State AZ	Amount of Each Receipt this Period 5000.00	
Zip Code 85748-9208			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Marshall M. Lawrence, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1800 Manor House Dr		<b>Transaction ID:</b> IE060530.0010144	
City Louisville	State KY	Amount of Each Receipt this Period 500.00	
Zip Code 40220-1461			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-employed	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Kim L. Studer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 13645 Questa Del Sol		<b>Transaction ID:</b> IE060530.0010146	
City Lakeside	State CA	Amount of Each Receipt this Period 500.00	
Zip Code 92040-2760			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Department Of Defense	Occupation Department Of Defense		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1716 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Patrick Ellen Lynch

Mailing Address PO Box 1489

City State Zip Code  
Lancaster CA 93584-1489

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010147

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Claire C. Blum

Mailing Address 5900 Arlington Ave  
Apt 8E

City State Zip Code  
Bronx NY 10471-1309

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010155

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John T. McTier

Mailing Address 2521 Winding Way

City State Zip Code  
Valdosta GA 31602-1239

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010157

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1717 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Stuart J. Padove</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 3409 Oak Canyon Dr		<b>Transaction ID: IE060530.0010158</b>	
City State Zip Code Birmingham AL 35243-4810	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Princeton Pulm. Group	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Len Esposito</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 871 Mill Rock Ct		<b>Transaction ID: IE060530.0010167</b>	
City State Zip Code Lawrenceville GA 30044-6144	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Maverick Contractors Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. John H. Styles</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 3202 University Blvd		<b>Transaction ID: IE060530.0010170</b>	
City State Zip Code Houston TX 77005-3352	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Styles Company	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1718 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Eleanor C. Plaxico

Mailing Address 11 Burton Hills Blvd  
Apt 403

City Nashville State TN Zip Code 37215-6151

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010171

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Hung B. Tran

Mailing Address 2734 N Meredith St

City Orange State CA Zip Code 92867-2165

FEC ID number of contributing federal political committee. **C**

Name of Employer Law Office Of Hung B Tran Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010172

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Janet Steyermark

Mailing Address 115 Beech St

City Nutley State NJ Zip Code 07110-2115

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010178

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1719 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Billie G. Jackson

Mailing Address 160 W 3rd St

City State Zip Code  
Mount Vernon NY 10550-3750

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sirris Record Co. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: IE060530.0010181

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael Sims

Mailing Address 521 Almy Rd 107

City State Zip Code  
Evanston WY 82930-9743

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Rancher

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: IE060530.0010183

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steve G. Morrow

Mailing Address 14997 SW Tualatin Sherwood Rd  
Ste 104

City State Zip Code  
Sherwood OR 97140-7124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Morrow's Cabinets & Construction Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: IE060530.0010185

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1720 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark Stover

Mailing Address 1715 Ridge Rd

City State Zip Code  
Canton GA 30114-4184

FEC ID number of contributing federal political committee. **C**

Name of Employer Pro. Atlas Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010187

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Beverly J. Adams

Mailing Address 2412 Heathershire Ln

City State Zip Code  
Matthews NC 28105-4077

FEC ID number of contributing federal political committee. **C**

Name of Employer Wachovia Ins Serv Occupation Insurance Acct Exec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010188

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Linda A. Horoho

Mailing Address 4 Bonnie Ln

City State Zip Code  
Collegeville PA 19426-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer Penn. View Christian School Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010189

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1721 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Marion J. Lawless

Mailing Address 4436 Meandering Way  
Apt A103

City Tallahassee State FL Zip Code 32308-5769

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
401.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010190

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Pamela M. Goss

Mailing Address 504 Forestway Dr

City Buffalo Grove State IL Zip Code 60089-3221

FEC ID number of contributing federal political committee. **C**

Name of Employer Goss Plumbing Occupation Controller

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010191

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Brenda J. Duncan

Mailing Address 1660 Kendall Dr  
Apt 134

City San Bernardino State CA Zip Code 92407-2874

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010202

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1722 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles L. Noble

Mailing Address PO Box 190

City State Zip Code  
Waseca MN 56093-0190

FEC ID number of contributing federal political committee. **C**

Name of Employer Larson Allen Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010204

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Margret L. Chuang

Mailing Address 22772 Centre Dr Ste 260

City State Zip Code  
Lake Forest CA 92630-1784

FEC ID number of contributing federal political committee. **C**

Name of Employer Synthetic Resources Inc. Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5500.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010205

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Martin F. Sullivan, Sr.

Mailing Address 501 W Weber Ave Fl 4

City State Zip Code  
Stockton CA 95203-3176

FEC ID number of contributing federal political committee. **C**

Name of Employer Sovereign General Insurance Service In Occupation Ceo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010206

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1723 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. James C. McKenna</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 107 Toppin Dr		<b>Transaction ID: IE060530.0010209</b>	
City <b>Hilton Head</b>	State <b>SC</b>	Zip Code <b>29926-1005</b>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. William F. Wingard</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 717 Maiden Choice Ln Apt 505 Apt 505		<b>Transaction ID: IE060530.0010210</b>	
City <b>Baltimore</b>	State <b>MD</b>	Zip Code <b>21228-6172</b>	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Barbara B. Scovil</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1809 Berkshire Rd		<b>Transaction ID: IE060530.0010211</b>	
City <b>Gates Mills</b>	State <b>OH</b>	Zip Code <b>44040-9748</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1724 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Christopher D. McHenry

Mailing Address 34571 Alvarado Niles Rd

City State Zip Code  
Union City CA 94587-4575

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Thai Village Cuisine Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: IE060530.0010215

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kenny K. Krakaver

Mailing Address 125 S San Tomas Aquino Rd

City State Zip Code  
Campbell CA 95008-2565

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
A-1 Radiator & Automotive Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: IE060530.0010216

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Bill Lawrence

Mailing Address 7522 W Jean St

City State Zip Code  
Tampa FL 33615-3458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
A B C Back Flow Testing President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2006

Transaction ID: IE060530.0010217

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1725 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles C. Jones

Mailing Address PO Box 481993

City State Zip Code  
Kansas City MO 64148-1993

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pentrust Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010221

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Esfandiar Fatehyar

Mailing Address 1501 S Sutro Ter

City State Zip Code  
Carson City NV 89706-0355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Western Servo Design Inc President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010222

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Janina Barycza

Mailing Address 1160 Chestnut St

City State Zip Code  
Menlo Park CA 94025-4312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Adamarc Financial Co Inc Broker

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010223

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1726 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. William Murray</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 802 Silas Deane Hwy		<b>Transaction ID:</b> IE060530.0010225	
City State Zip Code Wethersfield CT 06109-3027	Amount of Each Receipt this Period 600.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dynamic Coin & Jewelry	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Trevor G. Fernando</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 700 N Central Ave Ste 550 Ste. 550		<b>Transaction ID:</b> IE060530.0010226	
City State Zip Code Glendale CA 91203-3299	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer American Reprographics Llc	Occupation Graphic Artist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Camille Clark</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2550 Gray Falls Dr Ste 206		<b>Transaction ID:</b> IE060530.0010228	
City State Zip Code Houston TX 77077-6674	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Camaxx Concrete LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1727 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Larry Ingham, Sr. Mailing Address 55 Lyerly St Ste 304 City State Zip Code Houston TX 77022-3062 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> IE060530.0010230 Amount of Each Receipt this Period 500.00
Name of Employer Ingham Investigation & Security Service Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Robert E. Field, Jr. Mailing Address 21127 Tomball Pkwy City State Zip Code Houston TX 77070-1669 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> IE060530.0010231 Amount of Each Receipt this Period 300.00
Name of Employer Lakewood Cleaners Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Marilyn D. Johnson Mailing Address 2160 E Tecoma Rd City State Zip Code Phoenix AZ 85048-9587 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> IE060530.0010235 Amount of Each Receipt this Period 300.00
Name of Employer Bellissimo Medical Aesthetics LLC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Self Employed Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1728 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Bryan Burkholder</b>		Date of Receipt MM / DD / YYYY 05 / 30 / 2006
Mailing Address 143 Lawn Rd		<b>Transaction ID:</b> IE060530.0010236
City Palmyra	State PA	Zip Code 17078-8956
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Omni Dining Service	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. E. L. Craine</b>		Date of Receipt MM / DD / YYYY 05 / 30 / 2006
Mailing Address 2425 West Loop S Ste 745		<b>Transaction ID:</b> IE060530.0010238
City Houston	State TX	Zip Code 77027-4205
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Chartermark Mortgage Co. Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Kim Stratford</b>		Date of Receipt MM / DD / YYYY 05 / 30 / 2006
Mailing Address 2150 Kiowa Blvd N Ste B108		<b>Transaction ID:</b> IE060530.0010239
City Lake Havasu City	State AZ	Zip Code 86403-6401
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 300.00	
Name of Employer K Stratford Fine Arts Ltd.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1729 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Elvis Caraballo</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 4647 Las Positas Rd Ste C		<b>Transaction ID: IE060530.0010240</b>	
City State Zip Code Livermore CA 94551-8855		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Grace-Land Marble & Granite Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. Sebastian B. Conti</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 201 Pennsylvania Ave		<b>Transaction ID: IE060530.0010241</b>	
City State Zip Code Warren PA 16365		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Family Hearing Center Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard S. Putnam</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1620 Continental St		<b>Transaction ID: IE060530.0010242</b>	
City State Zip Code Redding CA 96001-1133		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Apex Technology Mgmt. President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1730 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Philomina Philip Mailing Address 1550 N Northwest Hwy City State Zip Code Park Ridge IL 60068-1411 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> IE060530.0010243 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Good Heart Home Care Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Reginald L. Brown Mailing Address 11519 Carlisle Pl City State Zip Code Rancho Cucamonga CA 91730-7233 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> IE060530.0010247 Amount of Each Receipt this Period 250.00
Name of Employer Occupation Tender Loving Care Home For Boys President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Patrick Marston Mailing Address 475 Central Ave Ste 305 City State Zip Code Saint Petersburg FL 33701-3817 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> IE060530.0010248 Amount of Each Receipt this Period 250.00
Name of Employer Occupation Optimal Outcomes LLC Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1731 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Hoke T. Rutherford

Mailing Address 401 N Grant St

City State Zip Code  
Fitzgerald GA 31750-2124

FEC ID number of contributing federal political committee. **C**

Name of Employer Rutherford Insurance Agency  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010249

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Dan W. Lee

Mailing Address 500 W Lookout Dr

City State Zip Code  
Richardson TX 75080-2122

FEC ID number of contributing federal political committee. **C**

Name of Employer Dan Lee Associates  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010253

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Laura R. Castro

Mailing Address Fm 1382 B

City State Zip Code  
Cedar Hill TX 75104

FEC ID number of contributing federal political committee. **C**

Name of Employer Worx Salon  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010254

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1732 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Candace McDaniel

Mailing Address 8021 E R L Thornton Fwy

City State Zip Code  
Dallas TX 75228-7001

FEC ID number of contributing federal political committee. **C**

Name of Employer Anti-Aging & Longevity Centerx Pa  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010255

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jason A. Stetler

Mailing Address 206 Barcelona St

City State Zip Code  
Camarillo CA 93010-7744

FEC ID number of contributing federal political committee. **C**

Name of Employer Claybrooke Co.  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010256

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Teresa Nelson

Mailing Address 2994 Jog Rd

City State Zip Code  
Greenacres FL 33467-2000

FEC ID number of contributing federal political committee. **C**

Name of Employer Teresa Nelson Realtor  
Occupation Real Estate Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010258

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1733 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. William Cavanaugh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>4148 Helleman St</b>		<b>Transaction ID: IE060530.0010261</b>	
City <b>Philadelphia</b>	State <b>PA</b>	Zip Code <b>19135-2530</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Cavanaugh's Accounting Service</b>	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Sam Arciero</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>15541 Duke Ave</b>		<b>Transaction ID: IE060530.0010262</b>	
City <b>Chino Hills</b>	State <b>CA</b>	Zip Code <b>91709-2875</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>S &amp; L Equipment Rentals Inc.</b>	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Thomas Feiffer</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>1170 Lee Wagener Blvd Ste 111</b>		<b>Transaction ID: IE060530.0010264</b>	
City <b>Fort Lauderdale</b>	State <b>FL</b>	Zip Code <b>33315-3561</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Skyline Jets LLC</b>	Occupation <b>CEO</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1734 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Fernando Almeida

Mailing Address 144 Broad St

City State Zip Code  
Cumberland RI 02864-8364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
F Almeida & Sons Ltd. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	6

Transaction ID: IE060530.0010265

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Roger Cubicciotti

Mailing Address 258 Midland Ave

City State Zip Code  
Montclair NJ 07042-3029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Molecular Machines, Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	6

Transaction ID: IE060530.0010267

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Greg Sanfilippo

Mailing Address 22 Orchard Ave

City State Zip Code  
Holmdel NJ 07733-1109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hybrid Cafés Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	6

Transaction ID: IE060530.0010268

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1735 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Richard D. Edwards</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 213 Traders Pass		<b>Transaction ID:</b> IE060530.0010269	
City Warner Robins	State GA	Zip Code 31088-2211	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Georgia Premiere Stonography LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. Owusu A. Firempong</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1411 W 54th St		<b>Transaction ID:</b> IE060530.0010270	
City Los Angeles	State CA	Zip Code 90062-2806	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Maj. Medical Centers Inc.	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Donna Love</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 10565 Old Placerville Rd		<b>Transaction ID:</b> IE060530.0010272	
City Sacramento	State CA	Zip Code 95827-2504	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sigcon Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1736 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Debi Stapleton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2951 Lytle 5 Points Rd		<b>Transaction ID: IE060530.0010274</b>	
City State Zip Code Waynesville OH 45068-9524	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Debis Mulch	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Newell Clarno</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 382		<b>Transaction ID: IE060530.0010280</b>	
City State Zip Code Prineville OR 97754-0382	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Country Boys Real Estate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Kathleen Irons</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 667 President St		<b>Transaction ID: IE060530.0010281</b>	
City State Zip Code Brooklyn NY 11215-1207	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Nurses In The Park Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1737 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Reinaldo Costa

Mailing Address 917 Candle Berry Rd

City State Zip Code  
Orlando FL 32825-6322

FEC ID number of contributing federal political committee. **C**

Name of Employer Green Yards Landscaping Corp.  
Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010283

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Luz D. Vazquez

Mailing Address 2501 W North Ave

City State Zip Code  
Chicago IL 60647-5201

FEC ID number of contributing federal political committee. **C**

Name of Employer La Junquena Food & Liquor-s, Inc.  
Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010284

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Christian D. Wentz

Mailing Address 3200 Clayton Rd

City State Zip Code  
Concord CA 94519-2819

FEC ID number of contributing federal political committee. **C**

Name of Employer Network-lq  
Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010286

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1738 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. M. D. Hossain</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 923 E 85th St 2nd Fl		<b>Transaction ID: IE060530.0010287</b>	
City State Zip Code Brooklyn NY 11236-3803		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bablu General Contracting Corp. Occupation Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Cathy C. Crall-Smith</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 908 Bridge St		<b>Transaction ID: IE060530.0010289</b>	
City State Zip Code New Cumberland PA 17070-1628		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A Heavenly Touch Occupation Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Eunice A. Austin</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2065 Grand Ave		<b>Transaction ID: IE060530.0010291</b>	
City State Zip Code North Baldwin NY 11510-2916		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer E A Austin Realty Corp. Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	875.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1739 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steve T. Wilson

Mailing Address 16068 Ambaum Blvd S

City State Zip Code  
Burien WA 98148-1425

FEC ID number of contributing federal political committee. **C**

Name of Employer Northwest Van Motorhome Rental  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010294

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth S. Hendrick

Mailing Address 1363 N Delaware St

City State Zip Code  
Sanford FL 32771-9040

FEC ID number of contributing federal political committee. **C**

Name of Employer Insurance Office Of American  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010295

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael J. Leib

Mailing Address PO Box 21

City State Zip Code  
Weatherly PA 18255-0021

FEC ID number of contributing federal political committee. **C**

Name of Employer Weatherly Casting & Machine Co.  
Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010296

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1740 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gordon L. Whitbeck

Mailing Address 1000 Backus Ave

City State Zip Code  
Springdale AR 72764-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer Whitbeck Lab Inc      Occupation Owner

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
875.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010297

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Mary A. Cinquina

Mailing Address 6850 Eiler Ln

City State Zip Code  
Cincinnati OH 45239-5617

FEC ID number of contributing federal political committee. **C**

Name of Employer Cinquina Family Llc      Occupation Manager

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3501.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010298

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Anthony J. Newbill

Mailing Address PO Box 21360

City State Zip Code  
Wickenburg AZ 85358-6360

FEC ID number of contributing federal political committee. **C**

Name of Employer A. J. Iron Works      Occupation Self Employed

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1750.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: IE060530.0010299

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	875.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1741 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. David J. Matulka

Mailing Address 2322 Route 38

City State Zip Code  
Cherry Hill NJ 08002-1852

FEC ID number of contributing federal political committee. **C**

Name of Employer Skeana Llc Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010300

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeff D. Penca

Mailing Address 1115 4th St

City State Zip Code  
Fulton IL 61252-1717

FEC ID number of contributing federal political committee. **C**

Name of Employer Crystal Clear Pools & Spas Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010301

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Donna Johnson

Mailing Address 5 American Legion Pl

City State Zip Code  
Greenfield IN 46140-2317

FEC ID number of contributing federal political committee. **C**

Name of Employer The Bread Ladies Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010302

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1742 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Roopnarine Boodoo		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 13500 Grand Ave		<b>Transaction ID:</b> IE060530.0010305	
City Burnsville	State MN	Amount of Each Receipt this Period 250.00	
Zip Code 55337-2713			
FEC ID number of contributing federal political committee. C			
Name of Employer Crystalware Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Julie M. Duncan		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 142 New St		<b>Transaction ID:</b> IE060530.0010306	
City Decatur	State GA	Amount of Each Receipt this Period 150.00	
Zip Code 30030-4132			
FEC ID number of contributing federal political committee. C			
Name of Employer Rex & Roxys Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Rich Masel		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address 60 Hazelwood Dr		<b>Transaction ID:</b> IE060530.0010307	
City Champaign	State IL	Amount of Each Receipt this Period 300.00	
Zip Code 61820-7460			
FEC ID number of contributing federal political committee. C			
Name of Employer Cbana Labs Inc.	Occupation Technical Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1743 / 2352  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Hyon B. Spencer

Mailing Address **732 E G Miles Pkwy**

City **Hinesville** State **GA** Zip Code **31313-4536**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Trinity Realty** Occupation **Owner**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	6

**Transaction ID:** IE060530.0010309

Amount of Each Receipt this Period  

	<b>500.00</b>
--	---------------

**B.** Full Name (Last, First, Middle Initial)  
Ms. Rosa M. Valladares

Mailing Address **2401 S Collins St**

City **Arlington** State **TX** Zip Code **76014-1245**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Milenio Real Estate Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	6

**Transaction ID:** IE060530.0010310

Amount of Each Receipt this Period  

	<b>300.00</b>
--	---------------

**C.** Full Name (Last, First, Middle Initial)  
Dr. Mariam S. Amiri

Mailing Address **11332 Mountain View Ave  
Ste A**

City **Loma Linda** State **CA** Zip Code **92354-3854**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Loma Linda Foot & Ankle Ctr** Occupation **Owner**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	6

**Transaction ID:** IE060530.0010311

Amount of Each Receipt this Period  

	<b>300.00</b>
--	---------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1744 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Francisco O. Diaz

Mailing Address PO Box 1044

City State Zip Code  
Parker AZ 85344-1044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
D & D Farms Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010312

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Julio Guerero

Mailing Address 7260 Parklane Rd

City State Zip Code  
Columbia SC 29223-7614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
El Monterrey Mex. Restaurant Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010314

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Vicke Hudgins

Mailing Address PO Box AA

City State Zip Code  
Selma CA 93662

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Page Funeral Chapel Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 30 / 2006

Transaction ID: IE060530.0010315

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1745 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Vera Nelson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 380 E Colorado Blvd Ste 149		<b>Transaction ID:</b> IE060530.0010316	
City Pasadena	State CA	Zip Code 91101-2249	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer EPIC Sports Quiksilver Board Riders	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. J. Kelpin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2030 Coliseum Dr Ste 201		<b>Transaction ID:</b> IE060530.0010323	
City Hampton	State VA	Zip Code 23666-3238	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer David J. Kelpin Insurance	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Tom Busby		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 163 W Herring Ave		<b>Transaction ID:</b> IE060530.0010325	
City Wasilla	State AK	Zip Code 99654-6834	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer 2K1 Neat Things	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1746 / 2352		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Scott D. Christley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>424 N Palmetto St</b>		<b>Transaction ID: IE060530.0010326</b>	
City <b>Leesburg</b>	State <b>FL</b>	Zip Code <b>34748-5275</b>	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Skate World</b>	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. R. Miller</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>1 Lower Ragsdale Dr</b>		<b>Transaction ID: IE060530.0010327</b>	
City <b>Monterey</b>	State <b>CA</b>	Zip Code <b>93940-5749</b>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Feel Golf Co. Inc.</b>	Occupation <b>Chairman</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Joseph E. Wojcik</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address <b>1300 W Walnut Hill Ln Ste 104</b>		<b>Transaction ID: IE060530.0010328</b>	
City <b>Irving</b>	State <b>TX</b>	Zip Code <b>75038-2912</b>	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Globe O T C LLC</b>	Occupation <b>Owner</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1747 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jeffrey A. Cretens		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 5984 Perkins 30.5 Rd		<b>Transaction ID:</b> IE060530.0010329
City State Zip Code Perkins MI 49872	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Cretens Brothers Waterbeds Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Emanuel J. Amato		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 15833 1st Ave S		<b>Transaction ID:</b> IE060530.0010330
City State Zip Code Burien WA 98148-1212	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Dba Sounds On Wheels	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Cornel Paraschiv		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 10935 Alondra Blvd		<b>Transaction ID:</b> IE060530.0010333
City State Zip Code Norwalk CA 90650-5403	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Luxor Gold Mortgage	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1748 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joe Falco, III

Mailing Address PO Box 907

City Navasota State TX Zip Code 77868-0907

FEC ID number of contributing federal political committee. **C**

Name of Employer Falco and Falco Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010335

Amount of Each Receipt this Period  
 150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Alynn R. Friedman

Mailing Address 6583 Straight Rd

City Oriental State NC Zip Code 28571-9290

FEC ID number of contributing federal political committee. **C**

Name of Employer Sylvan View Homes Llc Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010337

Amount of Each Receipt this Period  
 150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Cecelia M. St. Pierre

Mailing Address RR 1

City Hardin State MT Zip Code 59034-9801

FEC ID number of contributing federal political committee. **C**

Name of Employer Rancher Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 6

Transaction ID: IE060530.0010338

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1749 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Grant D. Petersen

Mailing Address 100 N Tampa St Ste 3600  
Ste 3600

City Tampa State FL Zip Code 33602-5867

FEC ID number of contributing federal political committee. **C**

Name of Employer Ogletree Deakins Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** IE060530.0010339

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard J. Carlander

Mailing Address PO Box 429

City Faribault State MN Zip Code 55021-0429

FEC ID number of contributing federal political committee. **C**

Name of Employer The State Bank Of Faribault Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** IE060530.0010341

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jose A. Colon

Mailing Address 90 North St

City Middletown State NY Zip Code 10940-4938

FEC ID number of contributing federal political committee. **C**

Name of Employer Don Jose Restaurant Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

**Transaction ID:** IE060530.0010346

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1750 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. William Bakley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 2850 Comly Rd		<b>Transaction ID: IE060530.0010347</b>	
City Philadelphia	State PA	Amount of Each Receipt this Period 75.00	
Zip Code 19154-2106			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rotometrics Philadelphia	Occupation General Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Luis De La Colina</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address PO Box 9119		<b>Transaction ID: IE060530.0010349</b>	
City North Bergen	State NJ	Amount of Each Receipt this Period 300.00	
Zip Code 07047-1319			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ar-Col. Travel Arrangement Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Kwang Ahn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 304 Pulaski St		<b>Transaction ID: IE060530.0010350</b>	
City S Plainfield	State NJ	Amount of Each Receipt this Period 500.00	
Zip Code 07080-3336			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Waste Clean Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	875.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1751 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Charles Bell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1029 N Lake Park Blvd		<b>Transaction ID:</b> IE060530.0010353	
City State Zip Code Carolina Beach NC 28428-4161	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Charles Bell CPA	Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Arne Gustafson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 41 Kimlo Rd		<b>Transaction ID:</b> IE060530.0010355	
City State Zip Code Wellesley MA 02481-4911	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Filo Chemical	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Tony Gee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 6069 Thackeray Ln		<b>Transaction ID:</b> IE060530.0010356	
City State Zip Code Tallahassee FL 32309-9415	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Tony Gee Intl.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1752 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. John P. Hart</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3091 W Galbraith Rd		<b>Transaction ID: IE060531.0010001</b>	
City State Zip Code Cincinnati OH 45239-4285	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer SelectionMgmt Occupation CEO	Aggregate Year-to-Date ▼ 20000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. David L. Haber</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 207 Norwegian Dr		<b>Transaction ID: IE060531.0010004</b>	
City State Zip Code Eaton OH 45320-2816	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Real Estate	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Karlyn Brett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 7232 N Pamela St		<b>Transaction ID: IE060531.0010006</b>	
City State Zip Code Spokane WA 99208-4940	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Core Tech Occupation Finance	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1753 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Ray M. Secrest</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address PO Box 420914		<b>Transaction ID: IE060531.0010007</b>	
City State Zip Code Kissimmee FL 34742-0914	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Home Improvement Advisors Inc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Xai Yang</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 5120 Tewkesbury Rd		<b>Transaction ID: IE060531.0010009</b>	
City State Zip Code Charlotte NC 28269-4548	Amount of Each Receipt this Period 1666.67		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kinkast LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1716.67		

Full Name (Last, First, Middle Initial) <b>C. Dr. Abu S. Alam</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 779 Springfield Ave		<b>Transaction ID: IE060531.0010011</b>	
City State Zip Code Summit NJ 07901-2332	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Abu S Alam MD PA	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4416.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1754 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Calvin C. Helmick

Mailing Address 1819 Schoolhouse Rd

City State Zip Code  
Lansing MI 48917-1458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Atlas Drugs Pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: IE060531.0010012

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Anthony J. Perri

Mailing Address 9726 W Sample Rd

City State Zip Code  
Coral Springs FL 33065-4004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Perri Financial Group Inc. Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1666.67

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: IE060531.0010013

Amount of Each Receipt this Period  
1666.67

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lewis Sukeforth

Mailing Address 50 Sukeforth Dr  
Box 4260

City State Zip Code  
Searsmont ME 04973-3340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sukeforth Builders Inc Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: IE060531.0010014

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2166.67
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1755 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jeffery E. Chaidez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 4757 Lincoln Ave		<b>Transaction ID:</b> IE060531.0010016	
City State Zip Code Oakland CA 94602-2534	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Delta Pacific Properties	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Norman Kutemperor		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 30200 Telegraph Rd		<b>Transaction ID:</b> IE060531.0010020	
City State Zip Code Bingham Farms MI 48025-4502	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Lee Bender		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 207 Green Cove Rd SE		<b>Transaction ID:</b> IE060531.0010023	
City State Zip Code Huntsville AL 35803-3005	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer C & L Performance Inc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1756 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Ann S. Sage

Mailing Address 1 Oakwood St

City State Zip Code  
Victoria TX 77904-4631

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010024

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Sohan Thind

Mailing Address 19721 State Route 2

City State Zip Code  
Monroe WA 98272-2341

FEC ID number of contributing federal political committee. **C**

Name of Employer Red Barn Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010027

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Walter Wong

Mailing Address 15707 Rockfield Blvd Ste 265

City State Zip Code  
Irvine CA 92618-2870

FEC ID number of contributing federal political committee. **C**

Name of Employer Diversified Resource Group Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010031

Amount of Each Receipt this Period  
1250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1757 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Stephanie Tomlinson		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 946 S Lake Blvd		<b>Transaction ID:</b> IE060531.0010035	
City State Zip Code Mahopac NY 10541-3242	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Salon Uccelli	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Judy T. Hudgens		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 2151 Alt A1A S Ste 2000 2151 Alt A1A S Ste 2000		<b>Transaction ID:</b> IE060531.0010036	
City State Zip Code Jupiter FL 33477	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CZR Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ed D. Butler		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address PO Box 1874		<b>Transaction ID:</b> IE060531.0010037	
City State Zip Code Buena Vista CO 81211-1874	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1758 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Jeffrey Dare</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 2175 N Alma School Rd Ste B101		<b>Transaction ID:</b> IE060531.0010042
City Chandler State AZ Zip Code 85224-2822	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Chandler Accident & Injury Med	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Maurice T. Everman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 5111 Walnut Pointe Ln		<b>Transaction ID:</b> IE060531.0010043
City Carmichael State CA Zip Code 95608-3093	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Everman Painting LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Kevin B. Hewett</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 10312 Docena PI NW		<b>Transaction ID:</b> IE060531.0010044
City Albuquerque State NM Zip Code 87114-4186	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer United States Government Dept Of Defen	Occupation Research Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1759 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Isaac A. Williams, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 912 W Hefner Rd		<b>Transaction ID:</b> IE060531.0010045
City Oklahoma City	State OK	Zip Code 73114-6927
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Williams Properties	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Julian M. Smith		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 401 El Cielito Rd		<b>Transaction ID:</b> IE060531.0010046
City Santa Barbara	State CA	Zip Code 93105-2310
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Riviera Assets Management	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Saeed Minhas		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 2508 Guadalupe St		<b>Transaction ID:</b> IE060531.0010047
City Austin	State TX	Zip Code 78705-4520
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Sam Computers & Communica- tions	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1760 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Clyde Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 517 Section Line St		<b>Transaction ID:</b> IE060531.0010049	
City Malvern	State AR	Zip Code 72104-4043	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Julian S. Kirk		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 670		<b>Transaction ID:</b> IE060531.0010054	
City Grenada	State MS	Zip Code 38902-0670	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kirk Auto Company Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David A. Frecka		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 215 Industrial Dr		<b>Transaction ID:</b> IE060531.0010055	
City Mansfield	State OH	Zip Code 44904-1347	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Next Generation Films Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1761 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jim Porter

Mailing Address 3928 NE Sequoia St

City State Zip Code  
Lees Summit MO 64064-1575

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Worldwide Ticket Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: IE060531.0010056

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James Townsend

Mailing Address 580 Executive PI

City State Zip Code  
Fayetteville NC 28305-5197

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Townsend Realestate President/owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: IE060531.0010057

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Larry D. Turpen

Mailing Address 760 Prather Dr

City State Zip Code  
Nancy KY 42544-8722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Car Dealer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: IE060531.0010058

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1762 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Mary Barger</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 301 Chelsea Rd		Transaction ID: IE060531.0010059	
City State Zip Code Monticello MN 55362-8430	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Suburban Manufacturing In-c.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Melton H. Hobbs</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 73 Tall Timbers Rd		Transaction ID: IE060531.0010061	
City State Zip Code Thomasville GA 31757-4807	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hobbs Land Development	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Rodney A. Koehler</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1909 N 14th Ave Ste C		Transaction ID: IE060531.0010063	
City State Zip Code Dodge City KS 67801-2365	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pt. Works	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1763 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lois L. Soto

Mailing Address 28016 Lobrook Dr

City Rancho Palos Verde State CA Zip Code 90275-3132

FEC ID number of contributing federal political committee. **C**

Name of Employer Long Beach BMW Occupation Controller

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: IE060531.0010064

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Miratica R. Berry

Mailing Address 3 Hillcroft Dr NE

City Rome State GA Zip Code 30161-5811

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: IE060531.0010066

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Carrie Kinsell

Mailing Address 3669 Canyon Ridge Ct NE

City Atlanta State GA Zip Code 30319-4823

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: IE060531.0010071

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1764 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Tony Ewing		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2001 US Hwy 380 E		<b>Transaction ID:</b> IE060531.0010073	
City Farmersville	State TX	Amount of Each Receipt this Period 500.00	
Zip Code 75442-2542			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Advanced Fixtures Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Rosalie Gastineau		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2890 Jadestone Ave		<b>Transaction ID:</b> IE060531.0010074	
City Simi Valley	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 93063-2148			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rosalie's School Of Dance	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ghazi J. Faddoul		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1255 Euclid Ave Ste 302		<b>Transaction ID:</b> IE060531.0010076	
City Cleveland	State OH	Amount of Each Receipt this Period 2500.00	
Zip Code 44115-1822			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Subway	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1765 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Yefim Vaynselbaum</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 200 Park Ave S Ste 1103 Ste. 1103		<b>Transaction ID:</b> IE060531.0010077	
City State Zip Code New York NY 10003-1512	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Park Ave Medical Imaging & Mamm	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Linda M. Prall</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 319 N Walnut St		<b>Transaction ID:</b> IE060531.0010079	
City State Zip Code Bloomington IN 47404-3840	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kilroy's	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Tricia J. Pallak</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 13500 Tamiami Trl N Ste 5		<b>Transaction ID:</b> IE060531.0010081	
City State Zip Code Naples FL 34110-6332	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Wood Floor Co.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1766 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Cynthia Schmitt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 8651 Riebel Rd		<b>Transaction ID:</b> IE060531.0010089	
City State Zip Code Galloway OH 43119-9737	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CSW Farms	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Philip H. Frederick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 15 Stonebreak Rd		<b>Transaction ID:</b> IE060531.0010090	
City State Zip Code Malta NY 12020-4425	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Window Tech Systems Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Yugo Tomita		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 879 W 190th St Ste 270		<b>Transaction ID:</b> IE060531.0010091	
City State Zip Code Gardena CA 90248-4223	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Tomita Law Office	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1767 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Walter H. Blake		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 127 Heritage Dr # B1		<b>Transaction ID:</b> IE060531.0010092	
City State Zip Code Saint Simons Is GA 31522-2023	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Luckvinder S. Malhi		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 786 W Shaw Ave		<b>Transaction ID:</b> IE060531.0010096	
City State Zip Code Clovis CA 93612-3216	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer USA Baby	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Joseph F. Hanlon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 14577 Big Basin Way		<b>Transaction ID:</b> IE060531.0010097	
City State Zip Code Saratoga CA 95070-6804	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer J H Draperies & Interiors	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1768 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ron M. Drey

Mailing Address 2530 Raleigh St

City State Zip Code  
Denver CO 80212-1215

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010101

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Russell L. Nowak

Mailing Address 412 4th St

City State Zip Code  
Luxemburg WI 54217-1051

FEC ID number of contributing federal political committee. **C**

Name of Employer D & S Machine Service Inc Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010107

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark R. Maddrell

Mailing Address 21872 Michigan Ln

City State Zip Code  
Lake Forest CA 92630-1911

FEC ID number of contributing federal political committee. **C**

Name of Employer Boeing Occupation  
Truck Driver

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010111

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 700.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 1769 / 2352</span> (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Robert C. Blowers</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 222 W Ash St	<b>Transaction ID: IE060531.0010112</b>
City State Zip Code Mason MI 48854-1599	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Inco. Graphics      Occupation Production Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

Full Name (Last, First, Middle Initial) <b>B. Ms. Jean Garvine</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 5352 Hereford Farm Rd	<b>Transaction ID: IE060531.0010114</b>
City State Zip Code Evans GA 30809-7006	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer J Garvine Personal Care Home      Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

Full Name (Last, First, Middle Initial) <b>C. Mr. Phillip Krupp</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 2562 W Market St	<b>Transaction ID: IE060531.0010115</b>
City State Zip Code Tiffin OH 44883-8874	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Tiffin Rental Inc.      Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1770 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Dean Morrison		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 100 S Philadelphia St		<b>Transaction ID:</b> IE060531.0010116
City State Zip Code Amarillo TX 79104-1023	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Budweiser Dist Co.	Occupation Beer Wholesaler	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jonathan E. Cox		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 6302 Benjamin Rd		<b>Transaction ID:</b> IE060531.0010119
City State Zip Code Tampa FL 33634-5116	Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Computer One Inc.	Occupation Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael Krasnerman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 107 Elm St		<b>Transaction ID:</b> IE060531.0010122
City State Zip Code Stamford CT 06902-3834	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Allsettled Group Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1771 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Lee M. Kenna, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1178 Bordeaux Dr		<b>Transaction ID:</b> IE060531.0010125	
City State Zip Code Sunnyvale CA 94089-1209	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Simco Electronics	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. James E. Haas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 27777 Franklin Rd Ste 1330 Ste 1330		<b>Transaction ID:</b> IE060531.0010131	
City State Zip Code Southfield MI 48034-8211	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer James E. Haas, CPA, PC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Alan D. Kacic		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 7750 E Beautiful Pl		<b>Transaction ID:</b> IE060531.0010132	
City State Zip Code Tucson AZ 85750-7411	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Medical Ins Agency	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1772 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Reza Vafadouste</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 1801 Colorado Ave Ste 210 Ste 210		<b>Transaction ID:</b> IE060531.0010133	
City State Zip Code Turlock CA 95382-2707	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer City Medical Corporation	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>B. Miss Mary J. Sandercock</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address PO Box 1478		<b>Transaction ID:</b> IE060531.0010134	
City State Zip Code Sandy OR 97055-1478	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sandy Home Care Svc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Dean Applegate</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 7244 Ky Highway 1234 S		<b>Transaction ID:</b> IE060531.0010135	
City State Zip Code Maysville KY 41056-8518	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Applegate Furniture LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1773 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Anita Jordan</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2122 Palmer Dr		<b>Transaction ID: IE060531.0010136</b>	
City State Zip Code Schaumburg IL 60173-3817	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Jordan Fulfillment Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Earl L. Hafner</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 303 Oakridge Dr		<b>Transaction ID: IE060531.0010137</b>	
City State Zip Code Panora IA 50216-1103	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Renfah LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Mary Jo Laroche</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1505 N Lima St		<b>Transaction ID: IE060531.0010140</b>	
City State Zip Code Burbank CA 91505-1804	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Walt Disney Corp	Occupation Senior Producer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1774 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Ron M. White, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 17476 Mill Hill Rd		<b>Transaction ID:</b> IE060531.0010144	
City State Zip Code Garfield AR 72732-9521	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer White House Paint & Quarter Ranch LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Constance Bell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 39 NE 44th St		<b>Transaction ID:</b> IE060531.0010146	
City State Zip Code Oakland Park FL 33334-1437	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Aargo Insurance Group	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Joann Perrella		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 6374 Schomburg Rd		<b>Transaction ID:</b> IE060531.0010147	
City State Zip Code Columbus GA 31909-4176	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Columbus Veterinary Medical Center	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1775 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary E. Huston

Mailing Address PO Box 99

City Edgewood State NM Zip Code 87015-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Huston Rammed Earth Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: IE060531.0010149

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David P. Ikeler

Mailing Address 6230 Evergreen St Ste A

City Houston State TX Zip Code 77081-6804

FEC ID number of contributing federal political committee. **C**

Name of Employer Paramount Properties Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: IE060531.0010151

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Elmer Stacy

Mailing Address 275 S Fork Place Dr

City Hopkinsville State KY Zip Code 42240-9378

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: IE060531.0010153

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1776 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Darrel W. Bonner		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 3145 N Frontage Rd		<b>Transaction ID:</b> IE060531.0010154	
City State Zip Code Billings MT 59101-7458	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Truck Shop Of Billings, In	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William D. Brake		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 4120 W Haslett Rd		<b>Transaction ID:</b> IE060531.0010159	
City State Zip Code Perry MI 48872-9327	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer North Shore Painting & Construction	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard J. Van Laanen		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 15643 Sherman Way Ste 420 Ste. 420		<b>Transaction ID:</b> IE060531.0010160	
City State Zip Code Van Nuys CA 91406-4183	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer R. J. Van Laanen Insurance Age	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1777 / 2352  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. John A. Conti</p> <p>Mailing Address 5317 Bellview Ave</p> <p>City State Zip Code Pensacola FL 32526-1009</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Conti Construction Co. Occupation Owner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 31 / 2006</span></p> <p><b>Transaction ID:</b> IE060531.0010162</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Dr. Donald P. Quick</p> <p>Mailing Address PO Box 94032</p> <p>City State Zip Code Lubbock TX 79493-4032</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Covenant Medical Group Occupation Doctor</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 31 / 2006</span></p> <p><b>Transaction ID:</b> IE060531.0010164</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. Jimmy G. Young</p> <p>Mailing Address 145 Watson Dr</p> <p>City State Zip Code Mantachie MS 38855-8381</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Countrywood Plantation Occupation Owner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 31 / 2006</span></p> <p><b>Transaction ID:</b> IE060531.0010165</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1350.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1778 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Neal D. Logan		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 109 N Madison St		<b>Transaction ID:</b> IE060531.0010171	
City State Zip Code Bloomfield IA 52537-1404	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Davis County Savings Bank	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Cindy Lowry		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 13305 Wooster St NW		<b>Transaction ID:</b> IE060531.0010181	
City State Zip Code North Lawrence OH 44666-9723	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Blossom Bucket	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Stan Mintz		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 10684 E Candlewood Dr		<b>Transaction ID:</b> IE060531.0010182	
City State Zip Code Scottsdale AZ 85255-8161	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sma West Llc	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1779 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Mary An Phillips</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 976 Derring Ln		<b>Transaction ID: IE060531.0010185</b>	
City <b>Bryn Mawr</b>	State <b>PA</b>	Zip Code <b>19010-1749</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For:	Occupation <b>Homemaker</b>	Aggregate Year-to-Date ▼ 700.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Jack C. Reukauf</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 540 Ostrander Rd		<b>Transaction ID: IE060531.0010187</b>	
City <b>East Aurora</b>	State <b>NY</b>	Zip Code <b>14052-1214</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For:	Occupation <b>Vice President</b>	Aggregate Year-to-Date ▼ 500.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mrs. Cecilia P. Rafalowski</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 145 Platt St		<b>Transaction ID: IE060531.0010195</b>	
City <b>Ansonia</b>	State <b>CT</b>	Zip Code <b>06401-3319</b>	Amount of Each Receipt this Period 1250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For:	Occupation <b>Retired</b>	Aggregate Year-to-Date ▼ 1401.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1780 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas A. McCall

Mailing Address 23 Canyon Crest Ct

City Frisco State TX Zip Code 75034-6846

FEC ID number of contributing federal political committee. **C**

Name of Employer Gold American Insurance Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010196

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John L. Walter

Mailing Address PO Box 686

City Centreville State MD Zip Code 21617-0686

FEC ID number of contributing federal political committee. **C**

Name of Employer Eastern Shore Legal Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010201

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William G. Godfrey

Mailing Address 639 Lake Shore Dr

City Parsippany State NJ Zip Code 07054-3665

FEC ID number of contributing federal political committee. **C**

Name of Employer Godfrey Organ Service Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010203

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1781 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Rocky L. Myrstol		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 5 Rustad Ln		Transaction ID: IE060531.0010204	
City State Zip Code Livingston MT 59047-9234	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Myrstol Post & Pole	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Mont R. Flora		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 550 S Melrose St		Transaction ID: IE060531.0010205	
City State Zip Code Placentia CA 92870-6327	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Liberty Heating And Ac	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Dave Hosier		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 8273 Melrose Dr		Transaction ID: IE060531.0010206	
City State Zip Code Lenexa KS 66214-1625	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer TLJ Mktg. & Sales	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1782 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard L. Mathews		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 523 Laurma Ln		Transaction ID: IE060531.0010207	
City State Zip Code Bethany Beach DE 19930-9633	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.39		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Burl D. Jones		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3434 Valley Creek Rd		Transaction ID: IE060531.0010209	
City State Zip Code Cecil AR 72930-3073	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Burcham & Jones Cattle Co. LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Edward T. McKenney		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 359		Transaction ID: IE060531.0010213	
City State Zip Code Woodburn OR 97071-0359	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gem Equipment Of Oregon Inc	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1783 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles L. Ball

Mailing Address 6825 Valjean Ave

City State Zip Code  
Van Nuys CA 91406-4713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
C & L Graphics, Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2006

Transaction ID: IE060531.0010216

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William H. Attebury

Mailing Address PO Box 7446

City State Zip Code  
Amarillo TX 79114-7446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2006

Transaction ID: IE060531.0010217

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James D. Fuiten

Mailing Address 9240 NW Groveland Rd

City State Zip Code  
Hillsboro OR 97124-9352

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Metro West Ambulance Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2006

Transaction ID: IE060531.0010218

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1784 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Haim Yehezkel</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 210 71st St Ste 309		<b>Transaction ID:</b> IE060531.0010219	
City Miami	State FL	Zip Code 33141-3235	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Elysee Investment Co Of Miami		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. Don Adams</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1616 S Kelly Ave		<b>Transaction ID:</b> IE060531.0010224	
City Edmond	State OK	Zip Code 73013-3651	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Oklahoma Sports Science		Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Eugene O'Neal, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1800 E 1st Ave		<b>Transaction ID:</b> IE060531.0010225	
City Anchorage	State AK	Zip Code 99501-1834	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Carlile Transportation Svcs		Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1785 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Rev. Richard L. Bender, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 424 Heartland Cir		Transaction ID: IE060531.0010227	
City State Zip Code Mulberry FL 33860-6509	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Seed Sowers Evangelistic Assoc. Inc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Edward Nix		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 98-025 Hekaha St Ste 221A		Transaction ID: IE060531.0010228	
City State Zip Code Aiea HI 96701-4993	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Nix Performing Arts Center	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Fran E. Laketek		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 21 N Brockway St Ste 202		Transaction ID: IE060531.0010229	
City State Zip Code Palatine IL 60067-5097	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Fel Services, Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1786 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Lonnie Dearman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 582		<b>Transaction ID:</b> IE060531.0010232	
City Palo Cedro	State CA	Zip Code 96073-0582	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dearman Pump	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Odell Merrick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 70 W Racetrack Rd		<b>Transaction ID:</b> IE060531.0010236	
City Somerset	State KY	Zip Code 42503-3934	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Soemrset Wood Products	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Stephen W. Kelley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3314 Scenic Dr		<b>Transaction ID:</b> IE060531.0010241	
City Napa	State CA	Zip Code 94558-4218	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Norcal Fiber & Recycling Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1787 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Bonita Myhers</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 336		<b>Transaction ID: IE060531.0010242</b>	
City State Zip Code Osseo WI 54758-0336	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Myhers Chiropractic Clinic	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert Sanfilippo</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 10509 Slater Ave		<b>Transaction ID: IE060531.0010244</b>	
City State Zip Code Fountain Valley CA 92708-4841	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Robert Sanfilippo CFP	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. James R. Brigham</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 24 Water Oak Dr		<b>Transaction ID: IE060531.0010246</b>	
City State Zip Code Hilton Head SC 29928-3009	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1788 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Peter Seppala		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 560 Nh Route 119		<b>Transaction ID:</b> IE060531.0010249	
City Rindge	State NH	Zip Code 03461-6049	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Seppala Detailing	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Albert N. Cecil, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2457 Lakeview Cir		<b>Transaction ID:</b> IE060531.0010253	
City Arlington	State TX	Zip Code 76013-3327	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard D. Schilf		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 15413 Lemac St		<b>Transaction ID:</b> IE060531.0010254	
City Van Nuys	State CA	Zip Code 91406-2015	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1789 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gary Harrington		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 144 N Tyndall Pkwy		<b>Transaction ID:</b> IE060531.0010257	
City State Zip Code Panama City FL 32404-6451	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Harrington Insurance Agency	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Phillip Faulk		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3103 Hal Siler Dr		<b>Transaction ID:</b> IE060531.0010259	
City State Zip Code Sanford NC 27332-7374	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer P R Faulk Electrical Corp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Tara A. Evans		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 5005 Colina Way		<b>Transaction ID:</b> IE060531.0010265	
City State Zip Code Sierra Vista AZ 85635-5709	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer M T E Enterprises	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1790 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ms. Christina A. Roehl</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2051 Rosa Parks Blvd		<b>Transaction ID: IE060531.0010266</b>	
City State Zip Code Detroit MI 48216-1556	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Search Services, Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Colleen Zona</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 20 Augur St		<b>Transaction ID: IE060531.0010267</b>	
City State Zip Code Hamden CT 06517-3435	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sunshine Preschool	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Jay Clark</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 6037 Century Oaks Dr		<b>Transaction ID: IE060531.0010269</b>	
City State Zip Code Chattanooga TN 37416-3658	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Walter Champion Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1791 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. V. C. Handy

Mailing Address 4 Brush Creek Farm

City State Zip Code  
Columbiana AL 35051-9517

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010271

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Fred R. Auzenne

Mailing Address 218 Justin Dr

City State Zip Code  
Cottonwood AZ 86326-4180

FEC ID number of contributing federal political committee. **C**

Name of Employer Nutri.-Health Supplements LLC Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010272

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Peggy Nuttroy

Mailing Address 3600 Hulen St Ste A4

City State Zip Code  
Fort Worth TX 76107-6861

FEC ID number of contributing federal political committee. **C**

Name of Employer Insi Exam One 578 Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010274

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1792 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. S. B. Rymer, III

Mailing Address 45 Lakeshore Ln

City State Zip Code  
Chattanooga TN 37415-7028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bridges Mediator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: IE060531.0010275

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael D. Kannel

Mailing Address 301 W Main St

City State Zip Code  
Montpelier OH 43543-1017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kannel Ins. Agency President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: IE060531.0010276

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Pao Li

Mailing Address 2000 Calle Bogota

City State Zip Code  
Rowland Hghts CA 91748-4149

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Li Paoking President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: IE060531.0010277

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1793 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Raymon L. Garrett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1310 Edgewood Ct		Transaction ID: IE060531.0010282	
City State Zip Code Murfreesboro TN 37130-8110	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Huddleson Steel Engineering Inc	Occupation Land Surveyor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Mario Tucciarone		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 21424 28th Ave		Transaction ID: IE060531.0010284	
City State Zip Code Flushing NY 11360-2646	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Zeferino Banda, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1050 E Ray Rd A5-196		Transaction ID: IE060531.0010286	
City State Zip Code Chandler AZ 85225-1774	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Banda Group Intl. LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1794 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Alan J. Stone		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 13 Pheasants Rdg S		<b>Transaction ID:</b> IE060531.0010287	
City Wilmington	State DE	Amount of Each Receipt this Period 250.00	
Zip Code 19807-1540		Transaction ID: IE060531.0010287	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Partner	Amount of Each Receipt this Period 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Laura A. Wacik		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 25 Partridge Ct		<b>Transaction ID:</b> IE060531.0010294	
City Miller Place	State NY	Amount of Each Receipt this Period 300.00	
Zip Code 11764-1330		Transaction ID: IE060531.0010294	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Jc Ryan Ebco-h&g,llc	Occupation Vice President	Amount of Each Receipt this Period 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Michael A. Kauppi		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3529 Salisbury Dr		<b>Transaction ID:</b> IE060531.0010297	
City Lexington	State KY	Amount of Each Receipt this Period 250.00	
Zip Code 40510-9742		Transaction ID: IE060531.0010297	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Pickups Plus Of Lexington Inc.	Occupation Chief Executive Officer	Amount of Each Receipt this Period 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	800.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1795 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Robert T. Cain

Mailing Address 700 N Laurel St

City State Zip Code  
Quitman GA 31643-1224

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010299

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gerard A. Mumfrey, II

Mailing Address 5650 Montgomery Rd

City State Zip Code  
Midlothian TX 76065-4818

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Pilot

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010302

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jan Pulley

Mailing Address 1206 Montague Ave Ext A

City State Zip Code  
Greenwood SC 29649-9113

FEC ID number of contributing federal political committee. **C**

Name of Employer Just Formals Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010304

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1796 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Howard W. Cole		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 474		Transaction ID: IE060531.0010307	
City Leakey	State TX	Zip Code 78873-0474	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mrs. Anne E. Ragsdale		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 27 Northumberland		Transaction ID: IE060531.0010309	
City Nashville	State TN	Zip Code 37215-4123	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Alfred J. Morrison		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 6 N Park Dr		Transaction ID: IE060531.0010311	
City Hunt Valley	State MD	Zip Code 21030-1818	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Asset Strategy Consultants	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1797 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Mark B. Tuchmann</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 1708		<b>Transaction ID: IE060531.0010313</b>	
City New Haven	State CT	Zip Code 06507-1708	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Beavex Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael Crocker</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 11210 US Highway 62 W		<b>Transaction ID: IE060531.0010316</b>	
City Princeton	State KY	Zip Code 42445-6065	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Crocker Truck & Equip. Service Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Frank K. Mayers</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 4 Sandpiper Dr		<b>Transaction ID: IE060531.0010319</b>	
City Cpu Village Of Gol	State FL	Zip Code 33436-5621	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1798 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Joan D. Gardner

Mailing Address 7624 Tally Ann Dr

City State Zip Code  
Tallahassee FL 32311-9478

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010321

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Alice B. Massie

Mailing Address 601 Knik Goose Bay Rd

City State Zip Code  
Wasilla AK 99654-8064

FEC ID number of contributing federal political committee. **C**

Name of Employer Guys & Gals Hair Designing Occupation Hair Designer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010322

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peter Pidochev

Mailing Address 25400 US Highway 19 N Ste 190

City State Zip Code  
Clearwater FL 33763-2157

FEC ID number of contributing federal political committee. **C**

Name of Employer Somat Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010324

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>950.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1799 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gerald B. Pickens		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address PO Box 1026		<b>Transaction ID:</b> IE060531.0010325	
City State Zip Code Blue Springs MO 64013-1026	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mast Technology Inc.	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. David H. Mack		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address PO Box 636		<b>Transaction ID:</b> IE060531.0010326	
City State Zip Code Saint Joseph MI 49085-0636	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Mack Insurance Agency Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Ryan M. Morgan		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 2192 Big Wood Cay		<b>Transaction ID:</b> IE060531.0010328	
City State Zip Code West Palm Beach FL 33411-5550	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Arrow Consulting & Design Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1800 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jason S. Bitner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1500 Woodward Ave		Transaction ID: IE060531.0010332	
City State Zip Code Lock Haven PA 17745-8565	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pennsylvania Financial Corporation	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Donald R. Deardorff		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1471 Pinecrest Dr		Transaction ID: IE060531.0010334	
City State Zip Code Grants Pass OR 97526-7238	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Eagle Veneer, Inc.	Occupation Plywood Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Robert L. Lubin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 8119 Round Hills Cir		Transaction ID: IE060531.0010337	
City State Zip Code Las Vegas NV 89113-1241	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1801 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Bonnie O Connell

Mailing Address 1625 S Burlington Rd

City State Zip Code  
Oregon IL 61061-9546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Heritage Square Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

**Transaction ID:** IE060531.0010339

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Sandra E. Barr

Mailing Address 2950 E 3rd St

City State Zip Code  
Tucson AZ 85716-4123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ideabanc Educator

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

**Transaction ID:** IE060531.0010340

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William J. Foody

Mailing Address 44 Parsons Rd

City State Zip Code  
Newton NJ 07860-6339

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

**Transaction ID:** IE060531.0010343

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1802 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Weston C. Smith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 2024 S Riverview Rd		<b>Transaction ID:</b> IE060531.0010345
City State Zip Code Peru IN 46970-7262	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Usaf Occupation Civil Service	Aggregate Year-to-Date ▼ 950.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Stephen L. Kovacs		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 326 Marion Oaks Trl		<b>Transaction ID:</b> IE060531.0010346
City State Zip Code Ocala FL 34473-7905	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer US Funding Sources, LLC Occupation President	Aggregate Year-to-Date ▼ 401.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Russel A. Arnett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 5617 E Los Santos Dr		<b>Transaction ID:</b> IE060531.0010348
City State Zip Code Long Beach CA 90815-3107	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Taxation Professionals In-c. Occupation President/ C E O	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1803 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Robert Barclay</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 2383 Rehmeysers Hollow Rd		<b>Transaction ID: IE060531.0010349</b>	
City State Zip Code Stewartstown PA 17363-7888	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Barkas Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Kent Atkin</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 1420 Flightline Dr Ste B		<b>Transaction ID: IE060531.0010352</b>	
City State Zip Code Lincoln CA 95648-9439	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Atkin Air LLC	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Zhongguo Zhao</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 905 145th PI NE		<b>Transaction ID: IE060531.0010355</b>	
City State Zip Code Bellevue WA 98007-4047	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Custom Components Group Incorp	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1804 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Newell Clarno</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 382		<b>Transaction ID:</b> IE060531.0010356	
City Prineville	State OR	Zip Code 97754-0382	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Country Boys Real Estate	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Timothy Lawler</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 510		<b>Transaction ID:</b> IE060531.0010364	
City Sunman	State IN	Zip Code 47041-0510	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lawler Chiropractic Physi- cians Center	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Jeanne C. Walsh</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1646 Niles Ave		<b>Transaction ID:</b> IE060531.0010366	
City Saint Paul	State MN	Zip Code 55116-1422	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1805 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Mahdi Sadek		Date of Receipt
Mailing Address 250 N Litchfield Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Goodyear AZ 85338-1333		<input type="text"/> 05 / <input type="text"/> 31 / <input type="text"/> 2006
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> IE060531.0010367
Name of Employer Occupation Apsilon Engineering Const- t., Inc. President		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 500.00
Aggregate Year-to-Date ▼		<input type="text"/> 500.00

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Alan Hensel		Date of Receipt
Mailing Address PO Box 8438		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Waco TX 76714-8438		<input type="text"/> 05 / <input type="text"/> 31 / <input type="text"/> 2006
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> IE060531.0010373
Name of Employer Occupation Hensel Electric President		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 350.00
Aggregate Year-to-Date ▼		<input type="text"/> 350.00

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jason H. Freyre		Date of Receipt
Mailing Address 6108 W Linebaugh Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Tampa FL 33625-5651		<input type="text"/> 05 / <input type="text"/> 31 / <input type="text"/> 2006
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> IE060531.0010378
Name of Employer Occupation Jason's Hauling President		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 500.00
Aggregate Year-to-Date ▼		<input type="text"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1806 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Rodrigue Camille

Mailing Address 6316 Lantana Rd

City State Zip Code  
Lake Worth FL 33463-6679

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Adela Stahl Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2750.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010380

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Adelia Coffman

Mailing Address 4902 McLaughlin Dr

City State Zip Code  
Central Point OR 97502-9445

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Adelia Coffman Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010382

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jim E. Mortensen

Mailing Address PO Box 111

City State Zip Code  
Uvalde TX 78802-0111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mortensen Engineering Associates Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
05 / 31 / 2006

Transaction ID: IE060531.0010383

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1807 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Emanuel Levy

Mailing Address 163 Bayside Dr

City Atlantic Bch State NY Zip Code 11509-1640

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: IE060531.0010385

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John L. Achenbach

Mailing Address 40 Clifton Dr

City Kennet Sq State PA Zip Code 19348-2737

FEC ID number of contributing federal political committee. **C**

Name of Employer Lotsof Capital Mgt. Occupation Investment Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: IE060531.0010386

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Virginia N. Coffee

Mailing Address PO Box 575  
PO Box 575

City Miles City State MT Zip Code 59301-0575

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: IE060531.0010389

Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1808 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Marie Santell

Mailing Address 581 Milltown Rd

City State Zip Code  
Brewster NY 10509-5216

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      315.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

**Transaction ID:** IE060531.0010393

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ralph H. Hingiss

Mailing Address 117 N 74th St

City State Zip Code  
Milwaukee WI 53213-3626

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      430.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

**Transaction ID:** LE060503.0010008

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kurtice C. Luther

Mailing Address 731 W Ferry St Apt 8H

City State Zip Code  
Buffalo NY 14222-1682

FEC ID number of contributing federal political committee. **C**

Name of Employer Self      Occupation Writer

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 6

**Transaction ID:** LE060503.0010010

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **330.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1809 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Sheila C. Robinson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 1000 W Century Ave Apt 308 Apt 308		<b>Transaction ID:</b> LE060506.0010008	
City Bismarck	State ND	Zip Code 58503-0910	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William N. Collings		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address 335 N Booth St		<b>Transaction ID:</b> LE060508.0010014	
City Dubuque	State IA	Zip Code 52001-6450	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Rick Kiser		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 2659 Old Gallant Rd		<b>Transaction ID:</b> LE060517.0010001	
City Gallant	State AL	Zip Code 35972-2541	Amount of Each Receipt this Period 240.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	590.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1810 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dayton T. Carr

Mailing Address 424 E 52nd St  
Apt. 7C

City State Zip Code  
New York NY 10022-6444

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation INFO REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: LE060517.0010007

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Frank A. Consalo

Mailing Address 2067 Saint Andrews Dr

City State Zip Code  
Berwyn PA 19312-1987

FEC ID number of contributing federal political committee. **C**

Name of Employer Wachovia Securities Occupation Mgt.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: LE060518.0010014

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William White

Mailing Address 315 W Lime Ave

City State Zip Code  
Monrovia CA 91016-2716

FEC ID number of contributing federal political committee. **C**

Name of Employer INFO REQUESTED Occupation Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: ME060506.0010017

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1811 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Edna M. Dickson

Mailing Address 6340 E Bixby Hill Rd

City State Zip Code  
Long Beach CA 90815-4704

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: ME060518.0010005

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Monte Veal

Mailing Address 4313 Middlefield Ct

City State Zip Code  
Norman OK 73072-3970

FEC ID number of contributing federal political committee. **C**

Name of Employer Family Physicians Inc. Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: OE060428.0010005

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Samuel Pappy

Mailing Address 4226 White Plains Rd

City State Zip Code  
Bronx NY 10466-3016

FEC ID number of contributing federal political committee. **C**

Name of Employer Century 21 Crestdale Realty Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5075.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: OE060501.0010001

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	675.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1812 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John O. Harris, III

Mailing Address 921 Sharon Dr

City Kings Mountain State NC Zip Code 28086-2735

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Land Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 6

Transaction ID: OE060502.0010003

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Manfred Nettek

Mailing Address 6737 Gordonsville Rd

City Gordonsville State VA Zip Code 22942-1702

FEC ID number of contributing federal political committee. **C**

Name of Employer Mnettek International Occupation Entrepreneur

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 6

Transaction ID: OE060507.0010003

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Dennis C. Brown

Mailing Address 401 N Griffith Park Dr

City Burbank State CA Zip Code 91506-2031

FEC ID number of contributing federal political committee. **C**

Name of Employer Dennis C. Brown Productions Occupation Music Composer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 6

Transaction ID: OE060508.0010001

Amount of Each Receipt this Period  
 700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1813 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. James C. Lombardi, Jr.

Mailing Address 1 Fairhaven Dr

City State Zip Code  
E Longmeadow MA 01028-2716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Russelectric Field Service Engineer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2006

Transaction ID: OE060508.0010003

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Carey P. Page, MD

Mailing Address 1467 Highland Ct

City State Zip Code  
Roanoke TX 76262-9061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: OE060510.0010004

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frank H. Rigsby

Mailing Address 11523 Sageking Dr

City State Zip Code  
Houston TX 77089-5119

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Isk Americas, Inc. Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2006

Transaction ID: OE060511.0010008

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1814 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Laurice A. Kloski		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 3590 Blue Jay Way Apt 203 Apt 203		<b>Transaction ID:</b> OE060512.0010009
City Eagan State MN Zip Code 55123-2206	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 256.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Hal S. Nickel, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 3012 Lake Ave		<b>Transaction ID:</b> OE060512.0010010
City Cheverly State MD Zip Code 20785-3141	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 280.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard P. Frost		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 30 Peddrick Rd		<b>Transaction ID:</b> OE060513.0010002
City Wayne State PA Zip Code 19087-5325	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Eastern Univ. Occupation Associate Professor	Aggregate Year-to-Date ▼ 251.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1815 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Jeanette A. Stewart</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 1 S Park Cir Ste 110		<b>Transaction ID: OE060514.0010001</b>	
City Charleston State SC Zip Code 29407-4603	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmaceutical Research	Occupation Research Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Dr. William C. Stewart</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 1 S Park Cir Ste 110		<b>Transaction ID: OE060514.0010002</b>	
City Charleston State SC Zip Code 29407-4603	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmaceutical Research	Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ernest J. Willenborg</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address PO Box 5489		<b>Transaction ID: OE060514.0010003</b>	
City Laguna Park State TX Zip Code 76644-5489	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1816 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mrs. Kathryn Smith</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 1615 Prendergast Ln		Transaction ID: OE060516.0010001	
City State Zip Code Saint Louis MO 63138-1723	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ajlion Staffing	Occupation Temporary/Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Allan P. Short</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 8799 N Lamhatty Ln		Transaction ID: OE060516.0010002	
City State Zip Code Daphne AL 36526-6169	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cellulose Solutions	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Dr. Hollis M. Fritts, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 6628 Smithtown Rd		Transaction ID: OE060516.0010004	
City State Zip Code Excelsior MN 55331-8209	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Medical Scanning Consultants	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	851.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1817 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael W. Hemmert

Mailing Address 2984 Austin Springs Blvd  
Apt J

City State Zip Code  
Miamisburg OH 45342-0906

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed    Occupation Business Owner

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: OE060517.0010001

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard K. Kim

Mailing Address 455 E 86th St  
Apt 20B

City State Zip Code  
New York NY 10028-6488

FEC ID number of contributing federal political committee. **C**

Name of Employer Kiss Products, Inc.    Occupation Chief Financial Officer

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: OE060517.0010003

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Donna S. Bradshaw

Mailing Address 24529 137th Ave SE

City State Zip Code  
Kent WA 98042-5172

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired    Occupation Homemaker

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: OE060517.0010004

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1818 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bryan S. Newell

Mailing Address 35212 Clearpond Rd

City State Zip Code  
Shawnee OK 74801-2654

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Eddies Submersible Service Inc.

Occupation  
Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: OE060517.0010007

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael F. Slaton

Mailing Address 305 Brookwood Forest Dr

City State Zip Code  
Sunnyvale TX 75182-2609

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self-employed

Occupation  
Accountant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: OE060517.0010010

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Lori Findlay

Mailing Address 3304 SE Lake Weir Ave Ste 3

City State Zip Code  
Ocala FL 34471-8602

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self-Employed

Occupation  
Restaurant Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2006

Transaction ID: OE060517.0010011

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1819 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jim McCleary Mailing Address 6661 Horseshoe Curv City State Zip Code Chanhassen MN 55317-9526 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> OE060517.0010012 Amount of Each Receipt this Period 2500.00
Name of Employer Self Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. William C. Parr Mailing Address 22493 Lankford Hwy City State Zip Code Cape Charles VA 23310-2101 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> OE060517.0010013 Amount of Each Receipt this Period 5000.00
Name of Employer United Country Parr Prope-rt Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Mary K. Franco Mailing Address 2437 Winfield Ln City State Zip Code Belvidere IL 61008-6438 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> OE060518.0010002 Amount of Each Receipt this Period 500.00
Name of Employer Mary Kays Custom Computer Programs, In Occupation Computer Programmer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1820 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Eugene Mauser</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2817 Ezra Ave		Transaction ID: OE060518.0010005	
City Zion	State IL	Zip Code 60099-2523	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer JSQ, Inc.	Occupation Construction Special Projects		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. W. Henry Anthony, Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 1327 W Highway 144		Transaction ID: OE060518.0010007	
City Lake Village	State AR	Zip Code 71653-7538	Amount of Each Receipt this Period 1250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Anthony Oil & Gas Co	Occupation Oil & Gas Production		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Milton J. Batson</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 316 Zenon Way		Transaction ID: OE060521.0010004	
City Arroyo Grande	State CA	Zip Code 93420-5532	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Batson Ranch	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1821 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dr. Moises Venegas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 202 Central Ave SE Ste 102		<b>Transaction ID: OE060523.0010002</b>	
City State Zip Code Albuquerque NM 87102-3459	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Albuquerque Partnership Of Acla	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Gary L. Arnold</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 135 Fern Hollow Rd Apt 806		<b>Transaction ID: OE060523.0010003</b>	
City State Zip Code Coraopolis PA 15108-4103	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer C. G. C. G. Professional Services, Lls	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. John A. Jago, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 615 S Valley Forge Rd		<b>Transaction ID: OE060523.0010005</b>	
City State Zip Code Lansdale PA 19446-3444	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1822 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. John A. Jago, Jr.

Mailing Address 615 S Valley Forge Rd

City Lansdale State PA Zip Code 19446-3444

FEC ID number of contributing federal political committee. **C**

Name of Employer Unknown Occupation Unknown

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 6

Transaction ID: OE060523.0010006

Amount of Each Receipt this Period  
 150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Janice H. Besche

Mailing Address 1057 N Mills River Rd

City Horse Shoe State NC Zip Code 28742-6745

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Real Estate Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 6

Transaction ID: OE060523.0010010

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. James M. Chambers

Mailing Address 515 Holly St

City McGehee State AR Zip Code 71654-2146

FEC ID number of contributing federal political committee. **C**

Name of Employer Gilead Family Resource Center Occupation Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 6

Transaction ID: OE060524.0010001

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1823 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Karen D. Bunch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address N5902 530th St		Transaction ID: OE060524.0010002	
City Ellsworth	State WI	Amount of Each Receipt this Period 500.00	
Zip Code 54011-5108		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ronald B. Wildman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 4747 Bonnie Branch Rd		Transaction ID: OE060524.0010003	
City Ellicott City	State MD	Amount of Each Receipt this Period 5000.00	
Zip Code 21043-6809		FEC ID number of contributing federal political committee. C	
Name of Employer Wildman Environmental Service Inc.	Occupation Partner	Aggregate Year-to-Date ▼ 5500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Douglas A. Holder, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 7964 Meadow Rush Loop		Transaction ID: OE060524.0010005	
City Sarasota	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 34238-4318		FEC ID number of contributing federal political committee. C	
Name of Employer Douglas Holder Real Estate Service	Occupation Real Estate Broker	Aggregate Year-to-Date ▼ 900.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1824 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Roscoe B. Marshall, IV Mailing Address 975 Turkey Knob City Boerne State TX Zip Code 78006-8026 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> OE060524.0010006 Amount of Each Receipt this Period 500.00
Name of Employer Self Occupation Small Business Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Moshe Levy Mailing Address 75 Atlantic St City Hackensack State NJ Zip Code 07601-4132 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> OE060524.0010007 Amount of Each Receipt this Period 500.00
Name of Employer Safeguards Technology LLC Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Peter L. Tucker Mailing Address 2000 Delpond Ln City Charlotte State NC Zip Code 28226-6466 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> OE060525.0010001 Amount of Each Receipt this Period 2500.00
Name of Employer Center For Cosmetic & Plastic Surgery Occupation Plastic Surgeon Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1825 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Nathaniel P. Jenkins

Mailing Address 401 REXBURG AVE

City State Zip Code  
Fort Washington MD 20744-6106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Genex Technologies, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: OE060525.0010004

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph G. Derubeis

Mailing Address 414 Central Ave Ste 2B

City State Zip Code  
Westfield NJ 07090-2521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self General Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: OE060525.0010005

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jonathan C. Cross

Mailing Address PO Box 359

City State Zip Code  
Exeter RI 02822-0504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sullivan & Cromwell LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: OE060526.0010002

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1826 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joe A. Cervantes, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 151 N Tustin Ave Ste C3		<b>Transaction ID:</b> OE060529.0010002
City State Zip Code Tustin CA 92780-2940	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Village Patrol Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Russ A. Neal, II		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 16342 Wildfire Cir		<b>Transaction ID:</b> OE060529.0010005
City State Zip Code Huntington Beach CA 92649-2539	Amount of Each Receipt this Period 800.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Southern California Edison	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Darell M. Fort		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 4715 30th St Ste 6		<b>Transaction ID:</b> OE060530.0010002
City State Zip Code San Diego CA 92116-1564	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Usavmoney.com Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1827 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Rolando L. Figueroa

Mailing Address PO Box 20574

City State Zip Code  
West Palm Bch FL 33416-0574

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Etm Roofing Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2006

Transaction ID: RA060503.0010156

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark Roe

Mailing Address 5325 Blackhawk Dr

City State Zip Code  
Danville CA 94506-5817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 7500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: RA060505.0010079

Amount of Each Receipt this Period  
7500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Michael Kapraun

Mailing Address PO Box 627

City State Zip Code  
Montrose MI 48457-0627

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kapraun Chiropractic Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2006

Transaction ID: RA060505.0020112

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1828 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David E. Hare		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 364 E Humorist Rd		<b>Transaction ID:</b> RA060505.0020183	
City State Zip Code Burbank WA 99323-9613	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer D & S Consulting	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Kenneth C. Sharp		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 6	
Mailing Address 943 N Wagner Rd		<b>Transaction ID:</b> RA060506.0010126	
City State Zip Code Ann Arbor MI 48103-2148	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sharp Electrical Services, Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Nickie Heidle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 6	
Mailing Address 4028 Lone Wolf Cir		<b>Transaction ID:</b> RA060513.0010116	
City State Zip Code Crossville TN 38572-6565	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Realty One Group	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	825.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1829 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Michael Bill		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2006	
Mailing Address 2603 Southmore Blvd		<b>Transaction ID:</b> RA060513.0020086	
City State Zip Code Houston TX 77004-7705	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bill Clair/Fairchild Mortuary	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1550.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Wayne Carpenter		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2006	
Mailing Address PO Box 237		<b>Transaction ID:</b> RA060513.0020118	
City State Zip Code Alvord TX 76225-0237	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Wc Dozer Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Joe Rodriguez		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2006	
Mailing Address 209 S Citrus Ave Ste 1		<b>Transaction ID:</b> RA060515.0010184	
City State Zip Code Covina CA 91723-2661	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mortgage Referral Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1830 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Maria Gonzalez

Mailing Address 5820 W Cypress St

City Tampa State FL Zip Code 33607-1751

FEC ID number of contributing federal political committee. **C**

Name of Employer Opportunity Health Services Corp. Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: RA060516.0010024

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joe Navarro

Mailing Address 584 Loop 230 W

City Smithville State TX Zip Code 78957-4701

FEC ID number of contributing federal political committee. **C**

Name of Employer Rustic Cedar Cabins of Texas Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: RA060516.0020028

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David V. Thompson

Mailing Address PO Box 1701

City Fairview State OR Zip Code 97024-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer Dream Weaver Drinks Occupation Owner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 6

Transaction ID: RA060516.0020149

Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1831 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Maria Thomas</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 350 5th Ave Ste 701		<b>Transaction ID: RA060517.0020075</b>	
City State Zip Code New York NY 10118-0701	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1250.00	
Name of Employer Trinamco Inc.	Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Sarah Warren</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 2181 Hwy 70 E		<b>Transaction ID: RA060517.0020088</b>	
City State Zip Code Beaufort NC 28516-7843	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00	
Name of Employer Warren Brothers Construct- ion	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Jaime Diaz</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 2617 W Beverly Blvd		<b>Transaction ID: RA060517.0030151</b>	
City State Zip Code Montebello CA 90640-2309	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00	
Name of Employer Wings Team	Occupation Real Estate Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1700.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1832 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Gordon W. Womack</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 3300 Kemp Rd		<b>Transaction ID: RA060518.0010056</b>	
City Dayton	State OH	Zip Code 45431-4200	Amount of Each Receipt this Period 700.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gordon W Womack DDS Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Gid D. Black, III</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 133 Hidden Brook Dr		<b>Transaction ID: RA060518.0020145</b>	
City Statesville	State NC	Zip Code 28677-1397	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Gidz Construction Services Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. R. T. Gilder, III</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 2025 White Springs Rd		<b>Transaction ID: RA060519.0010099</b>	
City Glenwood	State GA	Zip Code 30428-2227	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Georgia Atm Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1833 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John F. Bradshaw		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 6	
Mailing Address PO Box 388		Transaction ID: RA060520.0010165	
City State Zip Code Louisburg NC 27549-0388	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Behavior Management Consultants, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Joseph Skoczylas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 14415 Tamiami Trl		Transaction ID: RA060524.0010044	
City State Zip Code North Port FL 34287-2728	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer J T Foods Co. Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Steven Rivera		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address PO Box 759		Transaction ID: RA060524.0020010	
City State Zip Code Pine Lake GA 30072-0759	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Veterans Plumbing Solutions Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1834 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. George R. Jensen, Jr.

Mailing Address 100 Deerfield Ln Ste 140  
Ste 140

City State Zip Code  
**Malvern PA 19355-2100**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Usa Technologies Inc. Ceo

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ **1550.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 24 / 2006**

**Transaction ID: RA060524.0030121**

Amount of Each Receipt this Period  
**1250.00**

**B.** Full Name (Last, First, Middle Initial)  
Mr. James V. Strickland

Mailing Address 430 W Mountain Rd

City State Zip Code  
**Plymouth PA 18651-4307**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Geological & Environmental Associates President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ **250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 25 / 2006**

**Transaction ID: RA060525.0010059**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ingrid Tugwell

Mailing Address 530 International Blvd  
Building B

City State Zip Code  
**North Charleston SC 29418-6937**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pst. Computer Training In-c. CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ **5500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 25 / 2006**

**Transaction ID: RA060525.0020114**

Amount of Each Receipt this Period  
**5000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1835 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Patrick E. Dougherty

Mailing Address 2643 Gulf To Bay Blvd # 1560405

City State Zip Code  
Clearwater FL 33759-4940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Timeshares United Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: RA060526.0010089

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ernest Balogh

Mailing Address 411 Baltzell Ave

City State Zip Code  
Port Saint Joe FL 32456-1864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Port St. Joe Veterinary Clinic Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 6

Transaction ID: RA060527.0010014

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ann M. Slattery

Mailing Address 21 Alcazar Ave

City State Zip Code  
Johnston RI 02919-5204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Atlas Financial Services Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 6

Transaction ID: RA060527.0010144

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1836 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Janna Beyder</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 6	
Mailing Address 939 S Broadway Ste 715		Transaction ID: RA060528.0010190	
City State Zip Code Los Angeles CA 90015-1627	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer J B Fine Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. William F. Minnock, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 26 Clarkson Rd		Transaction ID: RA060530.0010144	
City State Zip Code Delmar NY 12054-3308	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Paulina O. Lam</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 7880 SW 180th St		Transaction ID: RA060531.0010054	
City State Zip Code Village Of Palmett FL 33157-6217	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer City One Lending Group	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1837 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Bowie

Mailing Address 20722 Plumwood Dr

City State Zip Code  
Kildeer IL 60047-8500

FEC ID number of contributing federal political committee. **C**

Name of Employer JFH Academy Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: RA060531.0010154

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Javier Porona

Mailing Address 903 Belvidere St

City State Zip Code  
Waukegan IL 60085-6313

FEC ID number of contributing federal political committee. **C**

Name of Employer Balazo Auto Repair Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: WE060501.0010002

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas J. Martin

Mailing Address 2775 Buford Hwy

City State Zip Code  
Duluth GA 30096-2872

FEC ID number of contributing federal political committee. **C**

Name of Employer Gwinnett Community Bank Occupation Chairman Of The Board

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: WE060501.0010003

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1838 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mariahelena Barboza

Mailing Address 135 Washington Ln

City State Zip Code  
Wyncote PA 19095-1528

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Center For Cosmetic Surgery Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2006

Transaction ID: WE060501.0010008

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Paul S. Jallo

Mailing Address 14314 Spring Hill Dr

City State Zip Code  
Spring Hill FL 34609-5263

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
B P of Spring Hill Drive Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: WE060502.0010001

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Mary K. Trowbridge

Mailing Address 67 W High St

City State Zip Code  
London OH 43140-1074

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mary K Trowbridge Do Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2006

Transaction ID: WE060502.0010005

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1839 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Jeremy Abraham</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 411 University St		<b>Transaction ID: WE060502.0010007</b>	
City State Zip Code Seattle WA 98101-2507	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Jeremy Todd Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Martha L. Hurley</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 8328 Mullen Rd		<b>Transaction ID: WE060503.0010003</b>	
City State Zip Code Shawnee Msn KS 66215-6019	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Associates In Womens Care	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Beatrice Br Borden</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 300 Hot Springs Rd Apt A28 # A28		<b>Transaction ID: WE060503.0010004</b>	
City State Zip Code Montecito CA 93108-2038	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1840 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John H. Gross		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 104 Mountain View Dr		<b>Transaction ID:</b> WE060503.0010005	
City State Zip Code Enola PA 17025-1534	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Syed M. Hussain		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2006	
Mailing Address 165 Madison Ave Rm 602		<b>Transaction ID:</b> WE060503.0010010	
City State Zip Code New York NY 10016-5431	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pro.-Med Examiners Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Ruth Oaks		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2006	
Mailing Address 3909 E Desmond Ln		<b>Transaction ID:</b> WE060504.0010001	
City State Zip Code Tucson AZ 85712-3304	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Oaks Appraisal and Realty	Occupation Info Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1841 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Joseph Roach</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 3120 S Valley View Blvd Ste A		<b>Transaction ID: WE060504.0010002</b>	
City Las Vegas	State NV	Zip Code 89102-7719	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Advanced Intergrated Comm- unications	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Karla L. Shriver</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 4485 US Highway 160 E		<b>Transaction ID: WE060504.0010003</b>	
City Monte Vista	State CO	Zip Code 81144-9540	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pro.-View Real Estate	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Janice S. Smallwood</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 12701 Rancho Way		<b>Transaction ID: WE060504.0010004</b>	
City Garden Grove	State CA	Zip Code 92843-3047	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Smallwood Associates	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1842 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John M. Kary		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 1514 N 40th St		Transaction ID: WE060504.0010006	
City Seattle	State WA	Amount of Each Receipt this Period 100.00	
Zip Code 98103-8138			
FEC ID number of contributing federal political committee. C			
Name of Employer Quality Food Center	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Peter M. Shonk		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 397		Transaction ID: WE060504.0010008	
City Dublin	State NH	Amount of Each Receipt this Period 150.00	
Zip Code 03444-0397			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Larry Elmer Buckholz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 25607 Midway St		Transaction ID: WE060504.0010010	
City Dearborn Hts	State MI	Amount of Each Receipt this Period 300.00	
Zip Code 48127-3078			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1276.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1843 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Bettye Davis-Lewis

Mailing Address 4811 Jackson St

City State Zip Code  
Houston TX 77004-5626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Diversified Health Care CEO  
Systems

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 04 / 2006

Transaction ID: WE060504.0010012

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gene D. Adams

Mailing Address 119 N Washington St  
Box 752

City State Zip Code  
Seymour TX 76380-2556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Baylor Bankshares Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 551.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 04 / 2006

Transaction ID: WE060504.0010015

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Thelma L. Cooper

Mailing Address 5935 SW River Rd

City State Zip Code  
Hillsboro OR 97123-9126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 04 / 2006

Transaction ID: WE060504.0010019

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1844 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. B. Knott</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 17524 Kellogg Ave		<b>Transaction ID: WE060504.0010020</b>	
City State Zip Code Norwalk WI 54648-8032	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Autumn Records LLC	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ernie Parks</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 201425		<b>Transaction ID: WE060504.0010022</b>	
City State Zip Code Arlington TX 76006-1425	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Managed Care Inc.	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Courtney O'Dell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 10835 Al Highway 75		<b>Transaction ID: WE060505.0010001</b>	
City State Zip Code Ider AL 35981-4629	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ider Pitt Stop	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1845 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Linda F. Dozier		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 9467 Willowgate Dr		<b>Transaction ID:</b> WE060505.0010003	
City State Zip Code Cincinnati OH 45251-2389	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Proctor & Gamble	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Gail Hopke		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 73366 Palm Greens Pkwy		<b>Transaction ID:</b> WE060505.0010005	
City State Zip Code Palm Desert CA 92260-1159	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Bejewelled By Gail	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Evangelia A. Panoutsakos		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006	
Mailing Address 1016 N Fort Harrison Ave		<b>Transaction ID:</b> WE060505.0010006	
City State Zip Code Clearwater FL 33755-3017	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Demetrios Realty	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1846 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Linda K. Molitoris		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address PO Box 101		<b>Transaction ID:</b> WE060505.0010008	
City Mechanicsville	State PA	Amount of Each Receipt this Period 500.00	
Zip Code 18934-0101		FEC ID number of contributing federal political committee. C	
Name of Employer Central Bucks Chiropractic	Occupation Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Deloris Erickson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 2400 S Cliff Ave Apt 6		<b>Transaction ID:</b> WE060505.0010009	
City Sioux Falls	State SD	Amount of Each Receipt this Period 500.00	
Zip Code 57105-4040		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John L. Booth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 125 Morrison Grove Rd		<b>Transaction ID:</b> WE060505.0010010	
City Manteo	State NC	Amount of Each Receipt this Period 300.00	
Zip Code 27954-9669		FEC ID number of contributing federal political committee. C	
Name of Employer Booth Construction	Occupation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1847 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Stephanie Reinhart		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 805 N Porter St		Transaction ID: WE060508.0010001	
City State Zip Code Stuttgart AR 72160-3127	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sportsmans Drive Inn LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Dorothy H. Wilson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 505 Folkstone Cir		Transaction ID: WE060508.0010002	
City State Zip Code Augusta GA 30907-5706	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 526.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Judy Roseberry		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6	
Mailing Address 207 Alcove Dr		Transaction ID: WE060508.0010007	
City State Zip Code Grand Junction CO 81503-1443	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Judy Roseberry Inc.	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1848 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Ruth Nicholas

Mailing Address 1867 Airport Way  
Ste 150A

City State Zip Code  
Fairbanks AK 99701-4061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ruth Nicholas Od, PC Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: WE060508.0010009

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sharie Lawrence

Mailing Address 27762 Forbes Rd  
Ste 8

City State Zip Code  
Laguna Niguel CA 92677-1227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Freshskin Spa By Sharie Lawrence Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: WE060508.0010010

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Louis Phillips

Mailing Address 1604 N Broadway St

City State Zip Code  
Ballinger TX 76821-2414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Crown Burger President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2006

Transaction ID: WE060508.0010011

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1849 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Pedro Montalvo

Mailing Address PO Box 90520

City State Zip Code  
Phoenix AZ 85066-0520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cita. Design Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: WE060508.0010014

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Itamar Carmi

Mailing Address 24 W 23rd St Frnt

City State Zip Code  
New York NY 10010-5247

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: WE060509.0010001

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David C. Dittfurth

Mailing Address 1013 N Ash St

City State Zip Code  
Muenster TX 76252-2006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
David Dittfurth Welding Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2006

Transaction ID: WE060509.0010002

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1850 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Joanne Kim Phan		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 3773 University Dr Apt 207		<b>Transaction ID:</b> WE060509.0010005	
City Irvine	State CA	Zip Code 92612-4668	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1793.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Louise V. Van Dyke Rauch		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 6101 Whitby Rd Apt 411		<b>Transaction ID:</b> WE060509.0010006	
City San Antonio	State TX	Zip Code 78240-2182	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Patricia Chelberg		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 944 Calhoun PI SE		<b>Transaction ID:</b> WE060509.0010009	
City Aiken	State SC	Zip Code 29801-7214	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Polo Antiques of Aiken LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1851 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Charles B. Boggs		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2006	
Mailing Address 207 Lakewood Cir		<b>Transaction ID:</b> WE060509.0010011	
City State Zip Code Greer SC 29651-5956	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 686.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Paula Brown		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address PO Box 196		<b>Transaction ID:</b> WE060510.0010009	
City State Zip Code Downsville NY 13755-0196	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Catskill Country Mkt.	Occupation Operations Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Stephanie S. Jang		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 280 Broad Ave Ste 301		<b>Transaction ID:</b> WE060510.0010010	
City State Zip Code Palisades Park NJ 07650-1566	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Total Educ. Consulting Co- rp.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1852 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Stephanie J. McFadden

Mailing Address 217 Market St Ste 48

City State Zip Code  
Kittanning PA 16201-1544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Stephanie J. McFadden, At-ty. Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2006

Transaction ID: WE060510.0010011

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Kathleen M. Zelenka

Mailing Address 237 Highway 232

City State Zip Code  
Wilson KS 67490-8704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conoco Travel Shoppe Inc. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: WE060511.0010001

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Melissa L. Meyer

Mailing Address 159 Margaret St Ste 103

City State Zip Code  
Plattsburgh NY 12901-1874

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Primary Care Health Partners Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2006

Transaction ID: WE060511.0010004

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1853 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Craig Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address PO Box 4426		<b>Transaction ID: WE060511.0010006</b>	
City Flint	State MI	Zip Code 48504-0426	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer True Sound Records	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Jean Genis</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 3604 Fieldcrest Dr		<b>Transaction ID: WE060511.0010008</b>	
City Cincinnati	State OH	Zip Code 45211-6302	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Mina S. Schultz</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address 2033 Gateway Pl Ste 600		<b>Transaction ID: WE060511.0010011</b>	
City San Jose	State CA	Zip Code 95110-3712	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00	
Name of Employer Golden Coast Properties Intl.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1854 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Ann Fagan-Cook</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 901 Sweetwater St		<b>Transaction ID: WE060511.0010015</b>	
City State Zip Code Wheeler TX 79096	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer North Wheeler County Hospital	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Georgina Ungar</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 9100 S Dadeland Blvd Ste 510		<b>Transaction ID: WE060512.0010003</b>	
City State Zip Code Miami FL 33156-7815	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ungar Borbon Jewelers Int-	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00		

Full Name (Last, First, Middle Initial) <b>C. Lynn B. Ward</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4508 E Independence Blvd		<b>Transaction ID: WE060512.0010006</b>	
City State Zip Code Charlotte NC 28205-7484	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Car Phones Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1855 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Mitsy Anglin</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 11860 W State Rd 84 # 1112B		<b>Transaction ID: WE060512.0010007</b>	
City State Zip Code Davie FL 33325-3814	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1000.00		
Name of Employer United Health System Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Jeffrey J. Wunderlich</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 5244 W Belmont Ave		<b>Transaction ID: WE060512.0010009</b>	
City State Zip Code Chicago IL 60641-4209	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1000.00		
Name of Employer Jeffrey J Wunderlich Cert-ified Public	Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Ms. Rhonda L. Carder</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4635 Crater Lake Hwy		<b>Transaction ID: WE060512.0010010</b>	
City State Zip Code Medford OR 97504-9766	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 600.00		
Name of Employer Chaps Bar & Grill	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1856 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Roger A. Barlow, CPA		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 1109 E Park Dr Ste 100A		Transaction ID: WE060516.0010001	
City Birmingham	State AL	Zip Code 35235-2579	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Roger A. Barlow CPA, PC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Leonard Woodring		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 683 Magaro Rd		Transaction ID: WE060516.0010002	
City Enola	State PA	Zip Code 17025-1936	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Independent Handyman Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. James A. Sholtey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 24120 County Road 142		Transaction ID: WE060516.0010003	
City Goshen	State IN	Zip Code 46526-9204	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer JML Enterprises Unlimited, Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1857 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Carlos R. Munoz

Mailing Address 13 Club Pointe Dr

City State Zip Code  
White Plains NY 10605-4465

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: WE060516.0010007

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Kelly A. Hayden

Mailing Address 2623 River Rd

City State Zip Code  
Vandergrift PA 15690-6105

FEC ID number of contributing federal political committee. **C**

Name of Employer Venture Settlement Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: WE060516.0010009

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Frank W. Byron, Sr.

Mailing Address 3610 Ruskview Dr

City State Zip Code  
Saginaw MI 48603-2055

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: WE060516.0010011

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1858 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. George L. Poston

Mailing Address 125 Townpark Dr NW  
Ste 300

City Kennesaw State GA Zip Code 30144-5812

FEC ID number of contributing federal political committee. **C**

Name of Employer Spectator Advertising Solutions Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: WE060516.0010012

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Ingeborg E. Sepp

Mailing Address 2040 N 119th St

City Milwaukee State WI Zip Code 53226-2012

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 6

Transaction ID: WE060516.0010013

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roger L. Hodge

Mailing Address 7 Overlook Dr

City Clinton State NJ Zip Code 08809-1133

FEC ID number of contributing federal political committee. **C**

Name of Employer Tan Down Under Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 6

Transaction ID: WE060517.0010002

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1859 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Douglas M. Ruiru		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 39 Hamilton Ave		Transaction ID: WE060517.0010003	
City State Zip Code Barrington RI 02806-3513	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kilisoft Solutions Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Earl J. D'Amico		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 793 N Larkin Ave		Transaction ID: WE060517.0010004	
City State Zip Code Joliet IL 60435-5760	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Faye A. Hudson		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2006	
Mailing Address 903 Anderson St		Transaction ID: WE060517.0010006	
City State Zip Code Piedmont SC 29673-1418	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hudson Agency	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1860 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel McFate

Mailing Address 11590 Crystal Lake Dr

City State Zip Code  
Jerome MI 49249-9853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Straightline Electric Electrician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: WE060517.0020001

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Carol East

Mailing Address 24 Sokokis Cir

City State Zip Code  
Topsham ME 04086-1615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
East Accounting Associates Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: WE060517.0020003

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Miss Astghick Moradkhanians

Mailing Address 13235 Clark Ave

City State Zip Code  
Downey CA 90242-4722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested Info Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2006

Transaction ID: WE060517.0020007

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1861 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Edward A. Rocklin</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 2107 Van Ness Ave Ste 203		<b>Transaction ID: WE060517.0020009</b>	
City State Zip Code San Francisco CA 94109-2572	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Edward Rocklin MD	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Sally Sharaba</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 34900 Chardon Rd Ste 204		<b>Transaction ID: WE060517.0020011</b>	
City State Zip Code Willoughby OH 44094-9161	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sharaba Financial Service- s, Inc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5150.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Donita D. Powell</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 786 Omer Bond Rd		<b>Transaction ID: WE060518.0010002</b>	
City State Zip Code Royston GA 30662-5034	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Powell Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1862 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joe Crego

Mailing Address 282 Woodmont Rd # 47

City Milford State CT Zip Code 06460-8544

FEC ID number of contributing federal political committee. **C**

Name of Employer Superior Accessory Service Inc. Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: WE060518.0010005

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Rhonda J. Matthews

Mailing Address 1501 West Ave Apt B

City Austin State TX Zip Code 78701-1560

FEC ID number of contributing federal political committee. **C**

Name of Employer Matthews Financial Services Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2006

Transaction ID: WE060518.0010009

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ignacio Morales

Mailing Address 2530 N 2nd St 36

City Philadelphia State PA Zip Code 19133-3408

FEC ID number of contributing federal political committee. **C**

Name of Employer M & R Laundromat Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: WE060519.0010001

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1863 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jorge V. Sandoval

Mailing Address 10350 Heritage Park Dr  
Ste 106

City State Zip Code  
Santa Fe Springs CA 90670-7302

FEC ID number of contributing federal political committee. **C**

Name of Employer Building Business & Homes Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: WE060519.0010003

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joe Mosqueda

Mailing Address 1920 Walden Pl

City State Zip Code  
Mesquite TX 75181-1888

FEC ID number of contributing federal political committee. **C**

Name of Employer A A A Fire & Safety Services Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: WE060519.0010004

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel R. Hinson

Mailing Address 2139 Burton Rd Apt 14

City State Zip Code  
Mount Pleasant TX 75455-2054

FEC ID number of contributing federal political committee. **C**

Name of Employer Daniel's Pest Control Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2006

Transaction ID: WE060519.0010005

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1300.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1864 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Cosmos V. Moses</b>		Date of Receipt MM / DD / YYYY 05 / 19 / 2006
Mailing Address 559 E Lincoln Ave		<b>Transaction ID: WE060519.0010006</b>
City State Zip Code Mount Vernon NY 10552-3701	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer Cosmos Real Estate Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Deborah N. Wachob</b>		Date of Receipt MM / DD / YYYY 05 / 19 / 2006
Mailing Address PO Box 54613		<b>Transaction ID: WE060519.0010007</b>
City State Zip Code Atlanta GA 30308-0613	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00
Name of Employer Action Ministries Inc	Occupation Finance Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Mary E. Hamilton</b>		Date of Receipt MM / DD / YYYY 05 / 19 / 2006
Mailing Address 494 W Philomena Dr		<b>Transaction ID: WE060519.0010008</b>
City State Zip Code Flagstaff AZ 86001-1367	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00
Name of Employer Self	Occupation Taxes	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1865 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Jeremy Craven		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2006	
Mailing Address 106 W Avenue O		<b>Transaction ID:</b> WE060519.0010009	
City State Zip Code Belton TX 76513-8502	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer E & J's Big Tex Trailer Outlet	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Alfonso S. Cordero		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2006	
Mailing Address 1001 Bridgeway		<b>Transaction ID:</b> WE060522.0010001	
City State Zip Code Sausalito CA 94965-2104	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Corso Enterprises Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. David M. Hsui		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2006	
Mailing Address 771 E Pico Blvd		<b>Transaction ID:</b> WE060522.0010003	
City State Zip Code Los Angeles CA 90021-2105	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Exclusive Wash Dye Inc.	Occupation Info Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1866 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Geraldine A. Sweeny		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 903 Sarbrook Dr		<b>Transaction ID:</b> WE060522.0010009	
City State Zip Code Cincinnati OH 45231-3717	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Health Alliance	Occupation Registered Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Mike Baribeau		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address PO Box 447		<b>Transaction ID:</b> WE060523.0010002	
City State Zip Code Stratford SD 57474-0447	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Baribeau Honey Co.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Carl B. Hardee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 2271 Highway 348		<b>Transaction ID:</b> WE060523.0010003	
City State Zip Code Loris SC 29569-6170	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1867 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Reed L. Helmly

Mailing Address 876 Loop 337 Ste 401

City State Zip Code  
New Braunfels TX 78130-3553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
A Fast Net LLC President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 23 / 2006

Transaction ID: WE060523.0010004

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Michele M. Wilkinson

Mailing Address 54 Stockbridge Rd

City State Zip Code  
Great Barrington MA 01230-1226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Micheles Salon & Day Spa President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 23 / 2006

Transaction ID: WE060523.0010008

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Julia S. Hare

Mailing Address 4120 W Vickery Blvd

City State Zip Code  
Fort Worth TX 76107-6423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Vickery Cafe Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 24 / 2006

Transaction ID: WE060524.0010002

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1868 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Georgina Ungar

Mailing Address 9100 S Dadeland Blvd Ste 510

City State Zip Code  
Miami FL 33156-7815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ungar Borbon Jewelers Int- Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 1700.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: WE060524.0020003

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Frank M. Klaus

Mailing Address 1300 N Charlotte St

City State Zip Code  
Pottstown PA 19464-2351

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Franks Hju Store Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: WE060524.0020004

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Lynn B. Ward

Mailing Address 4508 E Independence Blvd

City State Zip Code  
Charlotte NC 28205-7484

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Car Phones Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 6

Transaction ID: WE060524.0020006

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1869 / 2352  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mitsy Anglin

Mailing Address 11860 W State Rd 84 # 1112B

City State Zip Code  
Davie FL 33325-3814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
United Health System Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 24 / 2006

Transaction ID: WE060524.0020007

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey J. Wunderlich

Mailing Address 5244 W Belmont Ave

City State Zip Code  
Chicago IL 60641-4209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jeffrey J Wunderlich Cert- Accountant  
ified Public

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 24 / 2006

Transaction ID: WE060524.0020009

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rhonda L. Carder

Mailing Address 4635 Crater Lake Hwy

City State Zip Code  
Medford OR 97504-9766

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Chaps Bar & Grill Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 24 / 2006

Transaction ID: WE060524.0020010

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1870 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles W. Gunn, Jr.

Mailing Address 8810 Henson Rd

City Richmond State VA Zip Code 23236-2115

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: WE060525.0010003

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Carmen Gonzalez-Simon

Mailing Address 18811 Chaville Rd

City Lutz State FL Zip Code 33558-2856

FEC ID number of contributing federal political committee. **C**

Name of Employer Events Factory Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: WE060525.0010005

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Melba Kovics

Mailing Address 8215 Menaul Blvd NE

City Albuquerque State NM Zip Code 87110-4613

FEC ID number of contributing federal political committee. **C**

Name of Employer Melbas Floral Studio Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Transaction ID: WE060525.0010006

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5600.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1871 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Eleni Economou		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 6910 Ludlow St		<b>Transaction ID:</b> WE060525.0010008	
City State Zip Code Upper Darby PA 19082-2305	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Growing Together Learning Center	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Jeanne B. Stewart		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 1460 E Henrietta Rd		<b>Transaction ID:</b> WE060525.0010012	
City State Zip Code Rochester NY 14623-3118	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Rochester Sports Garden	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Andranik Ovassapian		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 5841 S Maryland Ave		<b>Transaction ID:</b> WE060526.0010003	
City State Zip Code Chicago IL 60637-1447	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer University Of Chicago	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1872 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Julie Gannon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 167 Sunny Slope Rd		<b>Transaction ID:</b> WE060526.0010004	
City State Zip Code Woodbury TN 37190-5952	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Busy Kids Learning Center	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Hugo Sirvas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 16935 S Dixie Hwy		<b>Transaction ID:</b> WE060526.0010008	
City State Zip Code Village Of Palmett FL 33157-4361	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Continental Bankers Insur Group	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Pam Hall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1808 N Bailey St		<b>Transaction ID:</b> WE060526.0010013	
City State Zip Code Jacksonville AR 72076-2725	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Emergency Recker Service	Occupation Info Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1873 / 2352
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Ms. Eva M. Voss

Mailing Address 830 Stonebridge Ln

City State Zip Code  
Crystal Lake IL 60014-1821

FEC ID number of contributing federal political committee. **C**

Name of Employer Northwest Appraisal Service  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: WE060530.0010001

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Dan Moon

Mailing Address 6505 Frontage Rd Ste 15

City State Zip Code  
Shawnee Mission KS 66202-3731

FEC ID number of contributing federal political committee. **C**

Name of Employer Accredited Addictions Recovery  
Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: WE060530.0010004

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jaimes Foster

Mailing Address 5065 S 41st St

City State Zip Code  
Milwaukee WI 53221-2507

FEC ID number of contributing federal political committee. **C**

Name of Employer Foster's Appraisal Services, Inc.  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2006

Transaction ID: WE060530.0010006

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1874 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey B. Speaks

Mailing Address 1760 Chandler Ln

City Lexington State KY Zip Code 40504-2390

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	6

**Transaction ID:** WE060530.0010009

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Keith Barber

Mailing Address PO Box 531

City Farmville State VA Zip Code 23901-0531

FEC ID number of contributing federal political committee. **C**

Name of Employer Keith Barber Construction Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

**Transaction ID:** WE060531.0010001

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Mary A. Cinquina

Mailing Address 6850 Eiler Ln

City Cincinnati State OH Zip Code 45239-5617

FEC ID number of contributing federal political committee. **C**

Name of Employer Cinquina Family Llc Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3501.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

**Transaction ID:** WE060531.0010002

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1875 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John C. Thrash		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 10000 Memorial Dr Ste 250 Ste. 250		<b>Transaction ID:</b> WE060531.0010003 Amount of Each Receipt this Period 500.00
City State Zip Code Houston TX 77024-3444	FEC ID number of contributing federal political committee. C	
Name of Employer E-corp Usa Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Pam Lawrence		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 8675 Maidstone Ct		<b>Transaction ID:</b> WE060531.0010004 Amount of Each Receipt this Period 300.00
City State Zip Code Largo FL 33777-1314	FEC ID number of contributing federal political committee. C	
Name of Employer Self Occupation Designer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Don Crotts		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 529 Townsend Ave		<b>Transaction ID:</b> WE060531.0010006 Amount of Each Receipt this Period 25000.00
City State Zip Code High Point NC 27263-2047	FEC ID number of contributing federal political committee. C	
Name of Employer Shanghai Leather Inc. Occupation Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	25800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1876 / 2352
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Travis R. Christiansen

Mailing Address 20 N Main St Ste 314 Ste. 203

City State Zip Code  
Saint George UT 84770-5677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Law Office Of Travis Christian Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: WE060531.0010007

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gordon H. Smith

Mailing Address 956 Rancho Cir

City State Zip Code  
Fullerton CA 92835-3337

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
High Tower Software Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 6000.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: WE060531.0010009

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Everett L. Kasner

Mailing Address 235 S Geronimo St

City State Zip Code  
Miramar Beach FL 32550-4058

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mirimar Beach Trucking Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: WE060531.0010010

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1877 / 2352
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mr. Clyde A. Willis

Mailing Address PO Box 2490

City State Zip Code  
Wichita Falls TX 76307-2490

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
WN Apache Corp. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: WE060531.0010013

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jose A. Altamirano

Mailing Address 2441 10th St

City State Zip Code  
Berkeley CA 94710-2545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bc Cabinet Info Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

Transaction ID: WE060531.0010017

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2987438.98

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1878 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Rogers For Congress  
Mailing Address PO Box 1113  
City Anniston State AL Zip Code 36202-1113  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation N/A  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 6  
Transaction ID: FF060508.0610001  
Amount of Each Receipt this Period  
5000.00  
MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS

**B.** Full Name (Last, First, Middle Initial)  
Dykema Gossett Federal PAC.  
Mailing Address 124 W Allegan St Ste 800  
City Lansing State MI Zip Code 48933-1724  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation N/A  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 6  
Transaction ID: FF060508.0610002  
Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
American Nurses Association P. A. C.  
Mailing Address 8515 Georgia Ave Ste 400  
City Silver Spring State MD Zip Code 20910-3492  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation N/A  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 2 / 2 0 0 6  
Transaction ID: FF060508.0630001  
Amount of Each Receipt this Period  
15000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 22500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1879 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SAIC Voluntary Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 10260 Campus Point Dr Stop F2		<b>Transaction ID:</b> FF060508.0630002
City San Diego	State CA	Zip Code 92121-1522
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 15000.00
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

Full Name (Last, First, Middle Initial) <b>B. Friends Of John Boehner</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 7908 Cincinnati Dayton Rd Unit 1		<b>Transaction ID:</b> FF060508.0630003
City West Chester	State OH	Zip Code 45069-6602
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20000.00
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	<b>MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS</b>

Full Name (Last, First, Middle Initial) <b>C. Swisher PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 459 E 16th St		<b>Transaction ID:</b> FF060508.0740001
City Jacksonville	State FL	Zip Code 32206-3025
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10000.00
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1880 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Shelley Moore Capito For Congress Committee

Mailing Address PO Box 11519

City State Zip Code  
**Charleston WV 25339-1519**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **20000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**05 / 03 / 2006**

**Transaction ID: FF060508.0740002**

Amount of Each Receipt this Period  
**5000.00**

**MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
Qpac- Qualcomm Inc. Political Action Committee

Mailing Address 2000 K St NW Ste 375

City State Zip Code  
**Washington DC 20006-1881**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **15000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**05 / 03 / 2006**

**Transaction ID: FF060508.0740003**

Amount of Each Receipt this Period  
**15000.00**

**C.** Full Name (Last, First, Middle Initial)  
AM General Sales Corp. P. A. C.

Mailing Address 105 N Niles Ave

City State Zip Code  
**South Bend IN 46617-2705**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**05 / 03 / 2006**

**Transaction ID: FF060508.0740004**

Amount of Each Receipt this Period  
**5000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>25000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1881 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
National Business Aviation Association P. A. C.  
 Mailing Address 1200 18th St NW  
Ste 400  
 City State Zip Code  
Washington DC 20036-2527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
N/A N/A  
 Receipt For:  Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 6  
**Transaction ID:** FF060508.0740005  
 Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Sprint Corporation Political Action Committee  
 Mailing Address 6450 Sprint Pkwy  
 City State Zip Code  
Overland Park KS 66251-6105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
N/A N/A  
 Receipt For:  Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 6  
**Transaction ID:** FF060508.0740006  
 Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Ehlers For Congress Committee  
 Mailing Address PO Box 3340  
 City State Zip Code  
Grand Rapids MI 49501-3340  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
N/A N/A  
 Receipt For:  Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 6  
**Transaction ID:** FF060510.0030001  
 Amount of Each Receipt this Period  
7500.00  
 MEMO: TRANSFER OF EXCESS  
CAMPAIGN FUNDS

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1882 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Bipartisan P A C / Mellon Financial Corporation		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address One Mellon Bank Center Rm. 625		<b>Transaction ID:</b> FF060524.0040001	
City Pittsburgh	State PA	Amount of Each Receipt this Period 5000.00	
Zip Code 15259-0001			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Bipartisan P A C / Mellon Financial Corporation		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address One Mellon Bank Center Rm. 625		<b>Transaction ID:</b> FF060524.0040002	
City Pittsburgh	State PA	Amount of Each Receipt this Period 5000.00	
Zip Code 15259-0001			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Grant Thornton LLC PAC		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2006	
Mailing Address 175 W Jackson Blvd Ste 2000		<b>Transaction ID:</b> FF060524.0040003	
City Chicago	State IL	Amount of Each Receipt this Period 5000.00	
Zip Code 60604-2615			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1883 / 2352
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Sandler, Travis &amp; Rosenberg PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 5200 Blue Lagoon Dr Ste 600		<b>Transaction ID: FF060524.0040004</b>	
City Miami      State FL      Zip Code 33126-7002	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A      Occupation N/A	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Progress Energy Employees' Federal PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 1510		<b>Transaction ID: FF060530.0010001</b>	
City Raleigh      State NC      Zip Code 27602-1510	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A      Occupation N/A	Aggregate Year-to-Date ▼ 15000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. International Council of Cruise Lines PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 12111 Wilson Blvd Floor 8		<b>Transaction ID: FF060530.0010002</b>	
City Arlington      State VA      Zip Code 22201-3001	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A      Occupation N/A	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1884 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Action Committee For Rural Electrification (Acre)		Date of Receipt																				
Mailing Address 4301 Wilson Blvd		<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>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	2		2	0	0	6													
City	State	Zip Code																				
Arlington	VA	22203-1867																				
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> FF060530.0010003																				
C		Amount of Each Receipt this Period																				
		15000.00																				
Name of Employer N/A	Occupation N/A																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																					
	15000.00																					

Full Name (Last, First, Middle Initial) <b>B.</b> Performant Financial Corp. PAC.		Date of Receipt																				
Mailing Address 591 Redwood Hwy No. 4000		<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>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	2		2	0	0	6													
City	State	Zip Code																				
Mill Valley	CA	94941-6001																				
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> FF060530.0010004																				
C		Amount of Each Receipt this Period																				
		2500.00																				
Name of Employer N/A	Occupation N/A																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																					
	2500.00																					

Full Name (Last, First, Middle Initial) <b>C.</b> UST Inc. Executives Administrators & Managers Poli		Date of Receipt																				
Mailing Address 100 W Putnam 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>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	2		2	0	0	6													
City	State	Zip Code																				
Greenwich	CT	06830-5342																				
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> FF060530.0010005																				
C		Amount of Each Receipt this Period																				
		5000.00																				
Name of Employer N/A	Occupation N/A																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																					
	5000.00																					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	22500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1885 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Morgan Stanley Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1585 Broadway 39th Fl		<b>Transaction ID:</b> FF060530.0010006
City State Zip Code New York NY 10036-8200	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. American Medical Association Political Action Comm</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1101 Vermont Ave NW		<b>Transaction ID:</b> FF060530.0010007
City State Zip Code Washington DC 20005-3521	Amount of Each Receipt this Period 15000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 15000.00
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

Full Name (Last, First, Middle Initial) <b>C. Novartis Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 701 Pennsylvania Ave NW Ste 725		<b>Transaction ID:</b> FF060530.0010008
City State Zip Code Washington DC 20004-2608	Amount of Each Receipt this Period 15000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 15000.00
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	35000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1886 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) BellSouth Fed - P A C		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1133 21st St NW Ste 900		<b>Transaction ID:</b> FF060530.0010009	
City Washington State DC Zip Code 20036-3333	Amount of Each Receipt this Period 2875.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation N/A	Aggregate Year-to-Date ▼ 8875.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Real Estate Roundtable PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1420 New York Ave NW Ste 1100		<b>Transaction ID:</b> FF060530.0010010	
City Washington State DC Zip Code 20005-2122	Amount of Each Receipt this Period 15000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation N/A	Aggregate Year-to-Date ▼ 15000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Devin Nunes Campaign Committee		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 891		<b>Transaction ID:</b> FF060530.0010011	
City Pixley State CA Zip Code 93256-0891	Amount of Each Receipt this Period 25000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation N/A	Aggregate Year-to-Date ▼ 25000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	42875.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1887 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Majority Initiative To Keep Electing Republicans F

Mailing Address **PO Box 65796**

City **Washington** State **DC** Zip Code **20035-5796**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **N/A**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **15000.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

**Transaction ID:** FF060530.0010012

Amount of Each Receipt this Period  

<b>15000.00</b>	
-----------------	--

**B.** Full Name (Last, First, Middle Initial)  
Blue Cross & Blue Shield of Michigan PAC

Mailing Address **602 W Ionia St**

City **Lansing** State **MI** Zip Code **48933-1015**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **N/A**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

**Transaction ID:** FF060530.0010013

Amount of Each Receipt this Period  

<b>2500.00</b>	
----------------	--

**C.** Full Name (Last, First, Middle Initial)  
Armenian American Legislative Issues Cmte.

Mailing Address **15 S 5th St  
Ste 900**

City **Minneapolis** State **MN** Zip Code **55402-1060**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **N/A**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

**Transaction ID:** FF060530.0010014

Amount of Each Receipt this Period  

<b>5000.00</b>	
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>22500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1888 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Kindred Health Care Inc. Political Action Committe

Mailing Address 680 S 4th St

City State Zip Code  
Louisville KY 40202-2407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060530.0010015

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Genesis Healthcare Corp. P. A. C.

Mailing Address 101 E State St

City State Zip Code  
Kennett Square PA 19348-3109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060530.0010016

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Medical Facilities of America Inc. PAC.

Mailing Address 2917 Penn Forest Blvd  
PO Box 29600

City State Zip Code  
Roanoke VA 24018-0796

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060530.0010017

Amount of Each Receipt this Period  
750.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4750.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1889 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Harborside Health Care Corporation, PAC

Mailing Address 1 Beacon St

City State Zip Code  
Boston MA 02108-3107

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060530.0010018

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Direct Supply Inc. Partners PAC Dsi Partners PAC

Mailing Address 6767 N Industrial Rd

City State Zip Code  
Milwaukee WI 53223-5815

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060530.0010019

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
HCR Manor Care PAC

Mailing Address 333 N Summit St  
16th Fl

City State Zip Code  
Toledo OH 43604-1531

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 6

Transaction ID: FF060530.0010020

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1890 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. United Health Services PAC, Inc.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 409 E Doyle St		<b>Transaction ID:</b> FF060530.0010021	
City State Zip Code Toccoa GA 30577-2107	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation N/A N/A	Aggregate Year-to-Date ▼ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Sempra Energy Employees Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 101 Ash St		<b>Transaction ID:</b> FF060530.0010022	
City State Zip Code San Diego CA 92101-3017	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation N/A N/A	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. N H E M A P. A. C.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 982		<b>Transaction ID:</b> FF060530.0010023	
City State Zip Code Washington DC 20044-0982	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation N/A N/A	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>8250.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1891 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Comerica Inc. Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address PO Box 75000		<b>Transaction ID: FF060530.0010024</b>	
City Detroit	State MI	Zip Code 48275-0001	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Friends Of Bobby Jindal, Inc.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 8550 United Plaza Blvd Ste 1001		<b>Transaction ID: FF060530.0010025</b>	
City Baton Rouge	State LA	Zip Code 70809-0200	Amount of Each Receipt this Period 6000.00
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00		

MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS

Full Name (Last, First, Middle Initial) <b>C. Manitowoc Company, Inc. P. A. C.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address PO Box 1101 P.O. Box 66		<b>Transaction ID: FF060531.0710001</b>	
City Marinette	State WI	Zip Code 54143-6101	Amount of Each Receipt this Period 10000.00
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	21000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1892 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Health Net Federal Services, Inc. Political Action

Mailing Address 21650 Oxnard St

City State Zip Code  
**Woodland Hills CA 91367-4901**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 18 / 2006**

**Transaction ID: FF060531.0710002**

Amount of Each Receipt this Period  
**5000.00**

**B.** Full Name (Last, First, Middle Initial)  
Leadership PAC 2002

Mailing Address 1199 N Fairfax St Ste 425

City State Zip Code  
**Alexandria VA 22314-1437**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **15000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 18 / 2006**

**Transaction ID: FF060531.0710003**

Amount of Each Receipt this Period  
**15000.00**

**C.** Full Name (Last, First, Middle Initial)  
American Occupational Therapy Assoc. Inc. P. A. C.

Mailing Address 4720 Montgomery Ln P.O. Box 31220

City State Zip Code  
**Bethesda MD 20814-5320**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 18 / 2006**

**Transaction ID: FF060531.0710004**

Amount of Each Receipt this Period  
**5000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>25000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1893 / 2352
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> H S B C North America Political Action Cmte.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 2700 Sanders Rd		<b>Transaction ID:</b> FF060531.0710005	
City Prospect Hts	State IL	Zip Code 60070-2701	Amount of Each Receipt this Period 15000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> K P M G PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 2001 M St NW		<b>Transaction ID:</b> FF060531.0710006	
City Washington	State DC	Zip Code 20036-3310	Amount of Each Receipt this Period 15000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> The Glaxosmithkline Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 5 Moore Dr P.O. Box 13358		<b>Transaction ID:</b> FF060531.0710007	
City Durham	State NC	Zip Code 27709	Amount of Each Receipt this Period 7500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	37500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1894 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Lyondell Chemical Company Political Action Committ</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 1101 Pennsylvania Ave NW Ste 7000		<b>Transaction ID: FF060531.0710008</b>	
City State Zip Code Washington DC 20004-2514	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation N/A N/A	Aggregate Year-to-Date ▼ 15000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. PMI Mortgage Insurance Co. Federal P A C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 601 Montgomery St		<b>Transaction ID: FF060531.0710009</b>	
City State Zip Code San Francisco CA 94111-2603	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation N/A N/A	Aggregate Year-to-Date ▼ 10000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. PMI Mortgage Insurance Co. Federal P A C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 601 Montgomery St		<b>Transaction ID: FF060531.0710010</b>	
City State Zip Code San Francisco CA 94111-2603	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation N/A N/A	Aggregate Year-to-Date ▼ 10000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	20000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1895 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Conaway For Congress</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 51272		<b>Transaction ID:</b> FF060605.0710001
City Midland	State TX	Zip Code 79710-1272
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer N/A	Occupation N/A	MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) <b>B. Friends Of Jack Kingston</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 2133		<b>Transaction ID:</b> FF060605.0710002
City Savannah	State GA	Zip Code 31402-2133
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90250.00
Name of Employer N/A	Occupation N/A	MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 90250.00	

Full Name (Last, First, Middle Initial) <b>C. National Roofing Contractors Association Political</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 10225 W Higgins Rd # 600		<b>Transaction ID:</b> FF060605.0710003
City Rosemont	State IL	Zip Code 60018-3890
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer N/A	Occupation N/A	MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	102750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1896 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
BellSouth Fed - P A C

Mailing Address 1133 21st St NW  
Ste 900

City Washington State DC Zip Code 20036-3333

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8875.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

**Transaction ID:** FF060605.0710004

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
National Association of Convenience Stores P A C

Mailing Address 1600 Duke St

City Alexandria State VA Zip Code 22314-3466

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

**Transaction ID:** FF060605.0710005

Amount of Each Receipt this Period  
15000.00

**C.** Full Name (Last, First, Middle Initial)  
Sallie Mae, Inc. Political Action Committee

Mailing Address 11600 Sallie Mae Dr

City Reston State VA Zip Code 20190-4796

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

**Transaction ID:** FF060605.0710006

Amount of Each Receipt this Period  
15000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	32500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1897 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
The Glaxosmithkline Political Action Committee

Mailing Address 5 Moore Dr  
P.O. Box 13358

City State Zip Code  
Durham NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060605.0710007

Amount of Each Receipt this Period  
7500.00

**B.** Full Name (Last, First, Middle Initial)  
American Health Care Association Political Action

Mailing Address 1201 L St NW

City State Zip Code  
Washington DC 20005-4024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060605.0710008

Amount of Each Receipt this Period  
15000.00

**C.** Full Name (Last, First, Middle Initial)  
Viacom Intl., Inc. Political Action Committee (Via

Mailing Address 1501 M St NW  
Ste 1100

City State Zip Code  
Washington DC 20005-1729

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060605.0710009

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	27500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1898 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Independent Insurance Agents and Brokers /America, Mailing Address 412 1st St SE Ste 300 City State Zip Code Washington DC 20003-1804 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> FF060605.0710010 Amount of Each Receipt this Period 15000.00
Name of Employer Occupation N/A N/A Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 15000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Holland and Knight Committee For Effective Governm Mailing Address 2099 Pennsylvania Ave NW Ste 100 City State Zip Code Washington DC 20006-6801 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> FF060605.0710011 Amount of Each Receipt this Period 10000.00
Name of Employer Occupation N/A N/A Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 15000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> The Orthopaedic PAC - American Association of Orth Mailing Address 317 Massachusetts Ave NE City State Zip Code Washington DC 20002-5769 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> FF060605.0710012 Amount of Each Receipt this Period 15000.00
Name of Employer Occupation N/A N/A Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 15000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	40000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1899 / 2352  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
The Bond Market Association Political Action Cmte  
Mailing Address 1399 New York Ave NW  
City Washington State DC Zip Code 20005-4725  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation N/A  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6  
Transaction ID: FF060605.0710013  
Amount of Each Receipt this Period  
15000.00

**B.** Full Name (Last, First, Middle Initial)  
Nrlca Political Action Committee  
Mailing Address 1630 Duke St Fl 4  
City Alexandria State VA Zip Code 22314-3426  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation N/A  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6  
Transaction ID: FF060605.0710014  
Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Nrlca Political Action Committee  
Mailing Address 1630 Duke St Fl 4  
City Alexandria State VA Zip Code 22314-3426  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation N/A  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6  
Transaction ID: FF060605.0710015  
Amount of Each Receipt this Period  
10000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1900 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Pickering For Congress

Mailing Address PO Box 4297

City State Zip Code  
Brandon MS 39047-4297

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: FF060605.0710016

Amount of Each Receipt this Period  
25000.00

MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS

**B.** Full Name (Last, First, Middle Initial)  
Reform PAC

Mailing Address PO Box 15584

City State Zip Code  
Washington DC 20003-0584

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: FF060605.0710017

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mc Crery For Congress

Mailing Address PO Box 52956  
P.O. Box 52956, Ste. 1900

City State Zip Code  
Shreveport LA 71135-2956

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
135000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: FF060605.0710018

Amount of Each Receipt this Period  
100000.00

MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	127500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1901 / 2352
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Fortis Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 3050 P.O. Box 3050		<b>Transaction ID: FF060605.0710019</b>	
City <b>Milwaukee</b>	State <b>WI</b>	Zip Code <b>53201-3050</b>	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Oxley For Congress</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 2004		<b>Transaction ID: FF060605.0710020</b>	
City <b>Findlay</b>	State <b>OH</b>	Zip Code <b>45839-2004</b>	Amount of Each Receipt this Period 50000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125000.00		
MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS			

Full Name (Last, First, Middle Initial) <b>C. Baker For Congress Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address PO Box 1694		<b>Transaction ID: FF060605.0710021</b>	
City <b>Baton Rouge</b>	State <b>LA</b>	Zip Code <b>70821-1694</b>	Amount of Each Receipt this Period 60000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75000.00		
MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	112500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1902 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Back America's Conservatives P. A. C.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address PO Box 6623		<b>Transaction ID: FF060605.0710022</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22306-0623</b>	Amount of Each Receipt this Period 15000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00		

Full Name (Last, First, Middle Initial) <b>B. Buckeye Liberty P A C</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address PO Box 29343		<b>Transaction ID: FF060605.0710023</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43229-0343</b>	Amount of Each Receipt this Period 15000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00		

Full Name (Last, First, Middle Initial) <b>C. U S Chamber PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006	
Mailing Address 1615 H St NW		<b>Transaction ID: FF060605.0710024</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20062-0001</b>	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation N/A		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	35000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1903 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Wally Herger For Congress Committee

Mailing Address PO Box 1500

City State Zip Code  
 Chico CA 95927-1500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
 25000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

**Transaction ID:** FF060605.0710025

Amount of Each Receipt this Period  
 25000.00

**MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
 The Badger Fund Inc.

Mailing Address 1055 Thomas Jefferson St NW  
 Ste 215

City State Zip Code  
 Washington DC 20007-5256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
 15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

**Transaction ID:** FF060605.0710026

Amount of Each Receipt this Period  
 15000.00

**C.** Full Name (Last, First, Middle Initial)  
 Mutual of Omaha Co. PAC. (Impac)

Mailing Address Mutual of Omaha Plaza

City State Zip Code  
 Omaha NE 68175-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

**Transaction ID:** FF060605.0710027

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>42500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1904 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mutual of Omaha Co. PAC. (Impac)

Mailing Address Mutual of Omaha Plaza

City State Zip Code  
Omaha NE 68175-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060605.0710028

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Buck McKeon for Congress

Mailing Address 24265 San Fernando Rd

City State Zip Code  
Santa Clarita CA 91321-2907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
125000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: FF060531.9999999

Amount of Each Receipt this Period  
25000.00

MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS

**C.** Full Name (Last, First, Middle Initial)  
Ed Royce for Congress

Mailing Address PO Box 2525

City State Zip Code  
Orange CA 92859-0525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
25800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 6

Transaction ID: FF060526.9999999

Amount of Each Receipt this Period  
25000.00

MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	55000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1905 / 2352
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Radanovich For Congress

Mailing Address 30151 Tomas

City State Zip Code  
R.S. Margarita CA 92688-2125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
26200.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: FF060526.9999998

Amount of Each Receipt this Period  
25000.00

MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS

**B.** Full Name (Last, First, Middle Initial)  
Ken Calvert For Congress Committee

Mailing Address PO Box 20123

City State Zip Code  
Riverside CA 92516-0123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: FF0600526.9999997

Amount of Each Receipt this Period  
25000.00

MEMO: TRANSFER OF EXCESS CAMPAIGN FUNDS

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50000.00
<b>TOTAL</b> This Period (last page this line number only) .....	1036625.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PATRICK R. LEOPOLD</b>		<b>Transaction ID:</b> B21B053106-1000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 3 IRISH CT.		Amount of Each Disbursement this Period 448.89
City GAITHERSBURG	State MD	
Zip Code 20878		Category/ Type
Purpose of Disbursement Generic Travel		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PATRICK R. LEOPOLD</b>		<b>Transaction ID:</b> B21B053106-1001 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 3 IRISH CT.		Amount of Each Disbursement this Period 631.04
City GAITHERSBURG	State MD	
Zip Code 20878		Category/ Type
Purpose of Disbursement Generic Travel		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PATRICK R. LEOPOLD</b>		<b>Transaction ID:</b> B21B053106-1002 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 3 IRISH CT.		Amount of Each Disbursement this Period 181.79
City GAITHERSBURG	State MD	
Zip Code 20878		Category/ Type
Purpose of Disbursement Generic Travel		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1261.72
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PATRICK R. LEOPOLD</b>		<b>Transaction ID: B21B053106-1003</b>	
Mailing Address 3 IRISH CT.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City GAITHERSBURG	State MD	Zip Code 20878	Amount of Each Disbursement this Period 320.81
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. PATRICK R. LEOPOLD</b>		<b>Transaction ID: B21B053106-1004</b>	
Mailing Address 3 IRISH CT.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City GAITHERSBURG	State MD	Zip Code 20878	Amount of Each Disbursement this Period 545.40
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. PATRICK R. LEOPOLD</b>		<b>Transaction ID: B21B053106-1005</b>	
Mailing Address 3 IRISH CT.		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006	
City GAITHERSBURG	State MD	Zip Code 20878	Amount of Each Disbursement this Period 1138.85
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2005.06</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. NICOLE LICARDI</b>		<b>Transaction ID:</b> B21B053106-1006 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1600 SOUTH EADS ST. APT. 1133-S		Amount of Each Disbursement this Period 753.46
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NICOLE LICARDI</b>		<b>Transaction ID:</b> B21B053106-1007 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1600 SOUTH EADS ST. APT. 1133-S		Amount of Each Disbursement this Period 749.61
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MATTHEW DOUGLAS LOWE</b>		<b>Transaction ID:</b> B21B053106-1008 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1006 DEVERE DRIVE		Amount of Each Disbursement this Period 2025.95
City SILVER SPRING State MD Zip Code 20903		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3529.02</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MATTHEW DOUGLAS LOWE</b>		<b>Transaction ID: B21B053106-1009</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1006 DEVERE DRIVE		Amount of Each Disbursement this Period 2016.09
City SILVER SPRING State MD Zip Code 20903	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1010</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 36.95
City ALEXANDRIA State VA Zip Code 22304	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1011</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 49.00
City ALEXANDRIA State VA Zip Code 22304	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2102.04
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1012</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 99.32
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1013</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 32.98
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1014</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 799.00
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

931.30

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1015</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 19.98
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1016</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 540.28
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1017</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 329.10
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	889.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1018</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 975.56
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1019</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 256.66
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1020</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 8.39
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1240.61

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
CHRISTOPHER A. MALONEY

Mailing Address 225 S. WHITTING ST.  
#806

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement  
Generic Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-1021  
Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

488.12

B. Full Name (Last, First, Middle Initial)  
CHRISTOPHER A. MALONEY

Mailing Address 225 S. WHITTING ST.  
#806

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement  
Generic Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-1022  
Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

.95

C. Full Name (Last, First, Middle Initial)  
CHRISTOPHER A. MALONEY

Mailing Address 225 S. WHITTING ST.  
#806

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement  
Generic Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-1023  
Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

96.32

SUBTOTAL of Disbursements This Page (optional) ▶

585.39

TOTAL This Period (last page this line number only) ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1024</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 16.10
City ALEXANDRIA State VA Zip Code 22304	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1025</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 20.05
City ALEXANDRIA State VA Zip Code 22304	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1026</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 12.00
City ALEXANDRIA State VA Zip Code 22304	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	48.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1027</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 698.30
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1028</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 29.46
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1029</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 5.40
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	733.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>		Transaction ID: B21B053106-103 Date of Disbursement MM / DD / YYYY 05 / 31 / 2006
Mailing Address ACCT 000736520503 34Y P.O. BOX 17577		Amount of Each Disbursement this Period 7626.00
City BALTIMORE State MD Zip Code 21297-0513	Purpose of Disbursement Blast Faxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Memo Entry

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER A. MALONEY</b>		Transaction ID: B21B053106-1030 Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 7.00
City ALEXANDRIA State VA Zip Code 22304	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER A. MALONEY</b>		Transaction ID: B21B053106-1031 Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 31.84
City ALEXANDRIA State VA Zip Code 22304	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	38.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER A. MALONEY</b>		<b>Transaction ID: B21B053106-1032</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 225 S. WHITTING ST. #806		Amount of Each Disbursement this Period 694.42
City ALEXANDRIA State VA Zip Code 22304	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL B. MARCHI</b>		<b>Transaction ID: B21B053106-1033</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2115 SULPHUR MINE RD		Amount of Each Disbursement this Period 1301.56
City CHARLOTTESVILLE State VA Zip Code 22911	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL B. MARCHI</b>		<b>Transaction ID: B21B053106-1034</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2115 SULPHUR MINE RD		Amount of Each Disbursement this Period .00
City CHARLOTTESVILLE State VA Zip Code 22911	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1995.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICHAEL B. MARCHI</b>		<b>Transaction ID:</b> B21B053106-1035 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2115 SULPHUR MINE RD		Amount of Each Disbursement this Period 790.35
City CHARLOTTEVILLE State VA Zip Code 22911	Purpose of Disbursement Generic Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MICHAEL B. MARCHI</b>		<b>Transaction ID:</b> B21B053106-1036 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2115 SULPHUR MINE RD		Amount of Each Disbursement this Period 196.14
City CHARLOTTEVILLE State VA Zip Code 22911	Purpose of Disbursement Generic Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MICHAEL B. MARCHI</b>		<b>Transaction ID:</b> B21B053106-1037 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2115 SULPHUR MINE RD		Amount of Each Disbursement this Period 358.17
City CHARLOTTEVILLE State VA Zip Code 22911	Purpose of Disbursement Generic Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1344.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICHAEL B. MARCHI</b>		<b>Transaction ID: B21B053106-1038</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2115 SULPHUR MINE RD		Amount of Each Disbursement this Period 1297.69
City CHARLOTTESVILLE State VA Zip Code 22911	Purpose of Disbursement Generic Salaries Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. DANIEL J. MATTOON</b>		<b>Transaction ID: B21B053106-1039</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 6344 CAVALIER CORRIDOR		Amount of Each Disbursement this Period 3000.00
City FALLS CHURCH State VA Zip Code 22044-1203	Purpose of Disbursement Generic Political Consultant Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. REPUBLICAN NATIONAL COMMITTEE</b>		<b>Transaction ID: B21B053106-104</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 310 FIRST STREET SE		Amount of Each Disbursement this Period 5487.46
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Satellite Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4297.69
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JESSICA O. MERRILL</b>		<b>Transaction ID:</b> B21B053106-1040
Mailing Address 1949 COLUMBIA PIKE APT. 41		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
City ARLINGTON	State VA	Amount of Each Disbursement this Period 863.72
Zip Code 22204		
Purpose of Disbursement Generic Salaries	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. JESSICA O. MERRILL</b>		<b>Transaction ID:</b> B21B053106-1041
Mailing Address 1949 COLUMBIA PIKE APT. 41		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City ARLINGTON	State VA	Amount of Each Disbursement this Period 859.86
Zip Code 22204		
Purpose of Disbursement Generic Salaries	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL L. McELWAIN</b>		<b>Transaction ID:</b> B21B053106-1042
Mailing Address 300 PRINCETON BLVD.		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City ALEXANDRIA	State VA	Amount of Each Disbursement this Period 436.05
Zip Code 22314		
Purpose of Disbursement Generic Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2159.63</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICHAEL L. McELWAIN</b>		<b>Transaction ID: B21B053106-1043</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period 390.60
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL L. McELWAIN</b>		<b>Transaction ID: B21B053106-1044</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period 289.91
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL L. McELWAIN</b>		<b>Transaction ID: B21B053106-1045</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period .00
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	680.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICHAEL L. McELWAIN</b>		<b>Transaction ID: B21B053106-1046</b> Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period _____ .00
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement Generic Travel Candidate Name _____ Category/Type _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MICHAEL L. McELWAIN</b>		<b>Transaction ID: B21B053106-1047</b> Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period _____ .00
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement Generic Travel Candidate Name _____ Category/Type _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MICHAEL L. McELWAIN</b>		<b>Transaction ID: B21B053106-1048</b> Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period _____ 3786.53
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement Generic Salaries Candidate Name _____ Category/Type _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3786.53</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICHAEL L. McELWAIN</b>		<b>Transaction ID:</b> B21B053106-1049 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period 1229.20
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Disbursement Generic Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. 3DOG CONSULTING. LLC</b>		<b>Transaction ID:</b> B21B053106-105 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 104 HUME AVE.		Amount of Each Disbursement this Period 10000.00
City ALEXANDRIA State VA Zip Code 22301		
Purpose of Disbursement Generic Political Consultant Fees	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL L. McELWAIN</b>		<b>Transaction ID:</b> B21B053106-1050 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period 123.17
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Disbursement Generic Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11352.37
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICHAEL L. McELWAIN</b>		<b>Transaction ID:</b> B21B053106-1051 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period _____ .00
City ALEXANDRIA State VA Zip Code 22314	Category/ Type	
Purpose of Disbursement Generic Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL L. McELWAIN</b>		<b>Transaction ID:</b> B21B053106-1052 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period _____ 31.54
City ALEXANDRIA State VA Zip Code 22314	Category/ Type	
Purpose of Disbursement Generic Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL L. McELWAIN</b>		<b>Transaction ID:</b> B21B053106-1053 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period _____ 30.00
City ALEXANDRIA State VA Zip Code 22314	Category/ Type	
Purpose of Disbursement Generic Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	_____ <b>61.54</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICHAEL L. McELWAIN</b>		<b>Transaction ID: B21B053106-1054</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 300 PRINCETON BLVD.		Amount of Each Disbursement this Period 3776.66
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ZOLA</b>		<b>Transaction ID: B21B053106-1055</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 800 F STREET NW		Amount of Each Disbursement this Period 2000.00
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM R. OORBEEK</b>		<b>Transaction ID: B21B053106-1056</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 3835 9TH ST. NORTH #107E		Amount of Each Disbursement this Period 42.62
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5819.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WILLIAM R. OORBEEK</b>		<b>Transaction ID:</b> B21B053106-1057 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 3835 9TH ST. NORTH #107E		Amount of Each Disbursement this Period 38.76
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. EMILY S. PALUMBOS</b>		<b>Transaction ID:</b> B21B053106-1058 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3813 COURTLAND CIRCLE		Amount of Each Disbursement this Period 254.10
City ALEXANDRIA State VA Zip Code 22305		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. EMILY S. PALUMBOS</b>		<b>Transaction ID:</b> B21B053106-1059 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3813 COURTLAND CIRCLE		Amount of Each Disbursement this Period 130.77
City ALEXANDRIA State VA Zip Code 22305		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	423.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. 3DOG CONSULTING. LLC</b>		<b>Transaction ID: B21B053106-106</b>	
Mailing Address 104 HUME AVE.		Date of Disbursement 05 / 11 / 2006	
City ALEXANDRIA	State VA	Zip Code 22301	Amount of Each Disbursement this Period 41.11
Purpose of Disbursement Generic Satellite Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. EMILY S. PALUMBOS</b>		<b>Transaction ID: B21B053106-1060</b>	
Mailing Address 3813 COURTLAND CIRCLE		Date of Disbursement 05 / 04 / 2006	
City ALEXANDRIA	State VA	Zip Code 22305	Amount of Each Disbursement this Period 16.76
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. EMILY S. PALUMBOS</b>		<b>Transaction ID: B21B053106-1061</b>	
Mailing Address 3813 COURTLAND CIRCLE		Date of Disbursement 05 / 12 / 2006	
City ALEXANDRIA	State VA	Zip Code 22305	Amount of Each Disbursement this Period 1053.36
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1111.23</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. EMILY S. PALUMBOS</b>		<b>Transaction ID: B21B053106-1062</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 3813 COURTLAND CIRCLE		Amount of Each Disbursement this Period 1049.50
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ENRIQUE M. PALMA</b>		<b>Transaction ID: B21B053106-1063</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 25 WEST GLEBE RD APT. C-1		Amount of Each Disbursement this Period 894.21
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ENRIQUE M. PALMA</b>		<b>Transaction ID: B21B053106-1064</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 25 WEST GLEBE RD APT. C-1		Amount of Each Disbursement this Period 890.36
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2834.07
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER T. PARANA</b>		<b>Transaction ID: B21B053106-1065</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1823 JUDICIAL WAY		Amount of Each Disbursement this Period 1543.71
City CROFTON State MD Zip Code 21114	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER T. PARANA</b>		<b>Transaction ID: B21B053106-1066</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1823 JUDICIAL WAY		Amount of Each Disbursement this Period 1533.82
City CROFTON State MD Zip Code 21114	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. EDWIN C. PATRU</b>		<b>Transaction ID: B21B053106-1067</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 3101 NORTH HAMPTON DR. UNIT #1111		Amount of Each Disbursement this Period 2591.34
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5668.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1930 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. EDWIN C. PATRU</b>		<b>Transaction ID: B21B053106-1068</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 3101 NORTH HAMPTON DR. UNIT #1111		Amount of Each Disbursement this Period 50.00
City ALEXANDRIA State VA Zip Code 22302		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EDWIN C. PATRU</b>		<b>Transaction ID: B21B053106-1069</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 3101 NORTH HAMPTON DR. UNIT #1111		Amount of Each Disbursement this Period 2581.47
City ALEXANDRIA State VA Zip Code 22302		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AUTOMATIC DATA PROCESSING</b>		<b>Transaction ID: B21B053106-107</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 9001006		Amount of Each Disbursement this Period 13.75
City LOUISVILLE State KY Zip Code 40290-1006		
Purpose of Disbursement Generic Payroll Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2645.22</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MARY ANN PAUGH</b>		<b>Transaction ID: B21B053106-1070</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 19013 RIVERTON STREET		Amount of Each Disbursement this Period 2317.76
City OLNEY State MD Zip Code 20832	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MARY ANN PAUGH</b>		<b>Transaction ID: B21B053106-1071</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 19013 RIVERTON STREET		Amount of Each Disbursement this Period 2307.89
City OLNEY State MD Zip Code 20832	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1072</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 31.00
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4656.65</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1073</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 102.04
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1074</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 292.84
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1075</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 175.41
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	570.29
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1076</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 85.34
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1077</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 12.76
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1078</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 60.80
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	158.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN B. POE</b>		Transaction ID: B21B053106-1079 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 676.70
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AUTOMATIC DATA PROCESSING</b>		Transaction ID: B21B053106-108 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 9001006		Amount of Each Disbursement this Period 173.43
City LOUISVILLE State KY Zip Code 40290-1006	Purpose of Disbursement Generic Payroll Service	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JONATHAN B. POE</b>		Transaction ID: B21B053106-1080 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 289.91
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1140.04
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1081</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period _____ .00
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel Candidate Name _____ Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1082</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period _____ .00
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel Candidate Name _____ Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1083</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period _____ .00
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel Candidate Name _____ Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	_____ <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1084</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 198.32
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1085</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 3146.94
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JONATHAN B. POE</b>		<b>Transaction ID: B21B053106-1086</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 339.79
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3685.05</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN B. POE</b>		Transaction ID: B21B053106-1087 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period .00
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JONATHAN B. POE</b>		Transaction ID: B21B053106-1088 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 52.57
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JONATHAN B. POE</b>		Transaction ID: B21B053106-1089 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 602 NORTH OVERLOOK DR.		Amount of Each Disbursement this Period 139.08
City ALEXANDRIA State VA Zip Code 22305	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	191.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. AUTOMATIC DATA PROCESSING**

Mailing Address P.O. BOX 9001006

City LOUISVILLE State KY Zip Code 40290-1006

Purpose of Disbursement  
Generic Payroll Service  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: B21B053106-109  
Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

255.39

Full Name (Last, First, Middle Initial)  
**B. JONATHAN B. POE**

Mailing Address 602 NORTH OVERLOOK DR.

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement  
Generic Salaries  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: B21B053106-1090  
Date of Disbursement

05 / 26 / 2006

Amount of Each Disbursement this Period

3137.09

Full Name (Last, First, Middle Initial)  
**C. JOHN R. RANDALL**

Mailing Address 4650 WASHINGTON BLVD.  
APT. #727

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
Generic Salaries  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: B21B053106-1091  
Date of Disbursement

05 / 12 / 2006

Amount of Each Disbursement this Period

1163.19

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

4555.67

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOHN R. RANDALL</b>		<b>Transaction ID:</b> B21B053106-1092 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4650 WASHINGTON BLVD. APT. #727		Amount of Each Disbursement this Period 18.00
City ARLINGTON State VA Zip Code 22201		
Purpose of Disbursement Generic Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JOHN R. RANDALL</b>		<b>Transaction ID:</b> B21B053106-1093 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 4650 WASHINGTON BLVD. APT. #727		Amount of Each Disbursement this Period 1159.34
City ARLINGTON State VA Zip Code 22201		
Purpose of Disbursement Generic Salaries	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL A. RICCI</b>		<b>Transaction ID:</b> B21B053106-1094 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 650 4TH ST. NE APT #3		Amount of Each Disbursement this Period 15.53
City WASHINGTON State DC Zip Code 20002		
Purpose of Disbursement Generic Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1192.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICHAEL A. RICCI</b>		<b>Transaction ID:</b> B21B053106-1095
Mailing Address 650 4TH ST. NE APT #3		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement Generic Salaries	Amount of Each Disbursement this Period 928.27	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MICHAEL A. RICCI</b>		<b>Transaction ID:</b> B21B053106-1096
Mailing Address 650 4TH ST. NE APT #3		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement Generic Salaries	Amount of Each Disbursement this Period 924.40	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KYLE S. ROBERTSON</b>		<b>Transaction ID:</b> B21B053106-1097
Mailing Address 2730 S. VEITCH ST. #409		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement Generic Travel	Amount of Each Disbursement this Period 254.60	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2107.27</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KYLE S. ROBERTSON</b>		<b>Transaction ID: B21B053106-1098</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 171.76
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. KYLE S. ROBERTSON</b>		<b>Transaction ID: B21B053106-1099</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period .00
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ADVANCED MAILING SERVICES</b>		<b>Transaction ID: B21B053106-110</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 14970 FARM CREEK DRIVE		Amount of Each Disbursement this Period 14181.34
City WOODBRIDGE State VA Zip Code 22191		
Purpose of Disbursement Generic Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14353.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KYLE S. ROBERTSON</b>		<b>Transaction ID:</b> B21B053106-1100 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 28.36
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KYLE S. ROBERTSON</b>		<b>Transaction ID:</b> B21B053106-1101 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period .00
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KYLE S. ROBERTSON</b>		<b>Transaction ID:</b> B21B053106-1102 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 321.36
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	349.72
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KYLE S. ROBERTSON</b>		<b>Transaction ID: B21B053106-1103</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 285.30
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KYLE S. ROBERTSON</b>		<b>Transaction ID: B21B053106-1104</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 17.50
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KYLE S. ROBERTSON</b>		<b>Transaction ID: B21B053106-1105</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 410.81
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	713.61
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KYLE S. ROBERTSON</b>		<b>Transaction ID: B21B053106-1106</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 1733.26
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KYLE S. ROBERTSON</b>		<b>Transaction ID: B21B053106-1107</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 285.19
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KYLE S. ROBERTSON</b>		<b>Transaction ID: B21B053106-1108</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 668.51
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **2686.96**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KYLE S. ROBERTSON</b>		<b>Transaction ID:</b> B21B053106-1109 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 186.26
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS MESSAGING SVC</b>		<b>Transaction ID:</b> B21B053106-111 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 15110 ACCT: C1-618866		Amount of Each Disbursement this Period 200.16
City ALBANY State NY Zip Code 12212-5110		
Purpose of Disbursement Generic Telephone Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KYLE S. ROBERTSON</b>		<b>Transaction ID:</b> B21B053106-1110 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 255.19
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	641.61
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KYLE S. ROBERTSON</b>		<b>Transaction ID:</b> B21B053106-1111 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 43.50
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KYLE S. ROBERTSON</b>		<b>Transaction ID:</b> B21B053106-1112 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2730 S. VEITCH ST. #409		Amount of Each Disbursement this Period 1729.40
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KATHLEEN E. ROTH</b>		<b>Transaction ID:</b> B21B053106-1113 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 311 S. FILLMORE ST.		Amount of Each Disbursement this Period 20.00
City ARLINGTON State VA Zip Code 22204		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1792.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KATHLEEN E. ROTH</b>		<b>Transaction ID: B21B053106-1114</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 311 S. FILLMORE ST.		Amount of Each Disbursement this Period 1242.70
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. KATHLEEN E. ROTH</b>		<b>Transaction ID: B21B053106-1115</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 311 S. FILLMORE ST.		Amount of Each Disbursement this Period 127.48
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. KATHLEEN E. ROTH</b>		<b>Transaction ID: B21B053106-1116</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 311 S. FILLMORE ST.		Amount of Each Disbursement this Period 1238.85
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2609.03</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. IOJANA D. SAFARIK</b>		<b>Transaction ID:</b> B21B053106-1117 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 10621 DELFIELD COURT		Amount of Each Disbursement this Period 1495.30
City LAUREL State MD Zip Code 20723	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. IOJANA D. SAFARIK</b>		<b>Transaction ID:</b> B21B053106-1118 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 10621 DELFIELD COURT		Amount of Each Disbursement this Period 1485.43
City LAUREL State MD Zip Code 20723	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. PETER R. SALING</b>		<b>Transaction ID:</b> B21B053106-1119 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 8328 DRAPER LANE		Amount of Each Disbursement this Period 50.00
City SILVER SPRING State MD Zip Code 20910	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3030.73
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. AMERICA DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-112	
Mailing Address 1272 CORPORATE PARK ROAD 2ND FLOOR		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City FOREST	State VA	Zip Code 24551	Amount of Each Disbursement this Period 2926.00
Purpose of Disbursement Generic Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. PETER R. SALING</b>		<b>Transaction ID:</b> B21B053106-1120	
Mailing Address 8328 DRAPER LANE		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City SILVER SPRING	State MD	Zip Code 20910	Amount of Each Disbursement this Period 48.11
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. PETER R. SALING</b>		<b>Transaction ID:</b> B21B053106-1121	
Mailing Address 8328 DRAPER LANE		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006	
City SILVER SPRING	State MD	Zip Code 20910	Amount of Each Disbursement this Period 40.00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3014.11</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PETER R. SALING</b>		<b>Transaction ID: B21B053106-1122</b>	
Mailing Address 8328 DRAPER LANE		Date of Disbursement 05 / 12 / 2006	
City SILVER SPRING	State MD	Zip Code 20910	Amount of Each Disbursement this Period 809.65
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. PETER R. SALING</b>		<b>Transaction ID: B21B053106-1123</b>	
Mailing Address 8328 DRAPER LANE		Date of Disbursement 05 / 25 / 2006	
City SILVER SPRING	State MD	Zip Code 20910	Amount of Each Disbursement this Period 52.00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. PETER R. SALING</b>		<b>Transaction ID: B21B053106-1124</b>	
Mailing Address 8328 DRAPER LANE		Date of Disbursement 05 / 26 / 2006	
City SILVER SPRING	State MD	Zip Code 20910	Amount of Each Disbursement this Period 805.79
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1667.44</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JENNIFER S. SHEFFIELD</b>		<b>Transaction ID:</b> B21B053106-1125 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 201 MASSACHUSETTS AVE. #315		Amount of Each Disbursement this Period 368.97
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JENNIFER S. SHEFFIELD</b>		<b>Transaction ID:</b> B21B053106-1126 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 201 MASSACHUSETTS AVE. #315		Amount of Each Disbursement this Period 55.58
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JENNIFER S. SHEFFIELD</b>		<b>Transaction ID:</b> B21B053106-1127 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 201 MASSACHUSETTS AVE. #315		Amount of Each Disbursement this Period 2188.30
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2612.85
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JENNIFER S. SHEFFIELD</b>		<b>Transaction ID: B21B053106-1128</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 201 MASSACHUSETTS AVE. #315		Amount of Each Disbursement this Period 341.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JENNIFER S. SHEFFIELD</b>		<b>Transaction ID: B21B053106-1129</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 201 MASSACHUSETTS AVE. #315		Amount of Each Disbursement this Period 40.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICA DIRECT INC.</b>		<b>Transaction ID: B21B053106-113</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK ROAD 2ND FLOOR		Amount of Each Disbursement this Period 2618.00
City FOREST State VA Zip Code 24551	Purpose of Disbursement Generic Printing	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2999.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JENNIFER S. SHEFFIELD</b>		<b>Transaction ID:</b> B21B053106-1130 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 201 MASSACHUSETTS AVE. #315		Amount of Each Disbursement this Period 2184.45
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. MACKENZIE J. SMITH</b>		<b>Transaction ID:</b> B21B053106-1131 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 1299.40
City RICHMOND State VA Zip Code 23233	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. MACKENZIE J. SMITH</b>		<b>Transaction ID:</b> B21B053106-1132 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 1470.12
City RICHMOND State VA Zip Code 23233	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4953.97
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MACKENZIE J. SMITH</b>		<b>Transaction ID: B21B053106-1133</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 296.69
City RICHMOND State VA Zip Code 23233		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MACKENZIE J. SMITH</b>		<b>Transaction ID: B21B053106-1134</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 407.24
City RICHMOND State VA Zip Code 23233		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MACKENZIE J. SMITH</b>		<b>Transaction ID: B21B053106-1135</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 154.00
City RICHMOND State VA Zip Code 23233		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	857.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MACKENZIE J. SMITH</b>		<b>Transaction ID: B21B053106-1136</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 894.03
City RICHMOND State VA Zip Code 23233		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MACKENZIE J. SMITH</b>		<b>Transaction ID: B21B053106-1137</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 282.31
City RICHMOND State VA Zip Code 23233		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MACKENZIE J. SMITH</b>		<b>Transaction ID: B21B053106-1138</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 35.99
City RICHMOND State VA Zip Code 23233		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1212.33
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MACKENZIE J. SMITH</b>		<b>Transaction ID:</b> B21B053106-1139 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 1353.43
City RICHMOND State VA Zip Code 23233		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AMERICA DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-114 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK ROAD 2ND FLOOR		Amount of Each Disbursement this Period 4312.00
City FOREST State VA Zip Code 24551		
Purpose of Disbursement Generic Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MACKENZIE J. SMITH</b>		<b>Transaction ID:</b> B21B053106-1140 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 4430 BREEZY BAY CIRCLE #301		Amount of Each Disbursement this Period 1349.58
City RICHMOND State VA Zip Code 23233		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>7015.01</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TARA M. SNOW</b>		<b>Transaction ID:</b> B21B053106-1141 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 2123 CALIFORNIA ST. NW #B3		Amount of Each Disbursement this Period 112.06
City WASHINGTON State DC Zip Code 20008	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. TARA M. SNOW</b>		<b>Transaction ID:</b> B21B053106-1142 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 2123 CALIFORNIA ST. NW #B3		Amount of Each Disbursement this Period 86.37
City WASHINGTON State DC Zip Code 20008	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. TARA M. SNOW</b>		<b>Transaction ID:</b> B21B053106-1143 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 2123 CALIFORNIA ST. NW #B3		Amount of Each Disbursement this Period 565.69
City WASHINGTON State DC Zip Code 20008	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	764.12
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TARA M. SNOW</b>		<b>Transaction ID:</b> B21B053106-1144 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2123 CALIFORNIA ST. NW #B3		Amount of Each Disbursement this Period 3163.97
City WASHINGTON State DC Zip Code 20008		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TARA M. SNOW</b>		<b>Transaction ID:</b> B21B053106-1145 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 2123 CALIFORNIA ST. NW #B3		Amount of Each Disbursement this Period 16.00
City WASHINGTON State DC Zip Code 20008		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TARA M. SNOW</b>		<b>Transaction ID:</b> B21B053106-1146 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2123 CALIFORNIA ST. NW #B3		Amount of Each Disbursement this Period 3160.12
City WASHINGTON State DC Zip Code 20008		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6340.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MELISSA L. SOUSA</b>		<b>Transaction ID:</b> B21B053106-1147 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2733 S. VEITCH STREET		Amount of Each Disbursement this Period 730.61
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. MELISSA L. SOUSA</b>		<b>Transaction ID:</b> B21B053106-1148 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2733 S. VEITCH STREET		Amount of Each Disbursement this Period 726.73
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. DAVID C. STEWART</b>		<b>Transaction ID:</b> B21B053106-1149 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1800 R ST. NW #401		Amount of Each Disbursement this Period 1412.08
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2869.42
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. AMERICA DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-115 Date of Disbursement
Mailing Address 1272 CORPORATE PARK ROAD 2ND FLOOR		<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City FOREST	State VA	Zip Code 24551
Purpose of Disbursement Generic Printing		Amount of Each Disbursement this Period <input type="text" value="4620.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DAVID C. STEWART</b>		<b>Transaction ID:</b> B21B053106-1150 Date of Disbursement
Mailing Address 1800 R ST. NW #401		<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20009
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <input type="text" value="1408.21"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1151 Date of Disbursement
Mailing Address 318 TIMBERWOOD		<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
City IRVINE	State CA	Zip Code 92620
Purpose of Disbursement Generic Travel		Amount of Each Disbursement this Period <input type="text" value="46.51"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6074.72"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1152</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 97.04
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1153</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period .00
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1154</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 45.95
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	142.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1155 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 273.11
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1156 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 8.40
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1157 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 42.62
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	324.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1158</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 625.70
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1159</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 1163.94
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. AMERICA DIRECT INC.</b>		<b>Transaction ID: B21B053106-116</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK ROAD 2ND FLOOR		Amount of Each Disbursement this Period 5373.58
City FOREST State VA Zip Code 24551	Purpose of Disbursement Generic DIRECT MAIL PRODUCTION	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>7163.22</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1160 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 601.20
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1161 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 98.39
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1162 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 142.23
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	841.82
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1163</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 220.80
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1164</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 322.49
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1165</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 944.13
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1487.42
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1166</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 122.38
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1167</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 127.02
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1168</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 1377.30
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1626.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1169 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 2647.46
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AMERICA DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-117 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK ROAD 2ND FLOOR		Amount of Each Disbursement this Period 143.10
City FOREST State VA Zip Code 24551	Purpose of Disbursement Generic DIRECT MAIL PRODUCTION	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1170 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 916.45
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3707.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1171 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 127.12
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1172 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 176.13
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID:</b> B21B053106-1173 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 993.21
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1296.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1174</b>	
Mailing Address 318 TIMBERWOOD		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City IRVINE	State CA	Zip Code 92620	Amount of Each Disbursement this Period 321.23
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1175</b>	
Mailing Address 318 TIMBERWOOD		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City IRVINE	State CA	Zip Code 92620	Amount of Each Disbursement this Period 300.69
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1176</b>	
Mailing Address 318 TIMBERWOOD		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City IRVINE	State CA	Zip Code 92620	Amount of Each Disbursement this Period 398.59
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1020.51</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1177</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 374.60
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1178</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 148.03
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LUKE STEDMAN</b>		<b>Transaction ID: B21B053106-1179</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 318 TIMBERWOOD		Amount of Each Disbursement this Period 989.33
City IRVINE State CA Zip Code 92620	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1511.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		<b>Transaction ID:</b> B21B053106-118 Date of Disbursement																				
Mailing Address SUITE 0001		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	8		2	0	0	6													
City CHICAGO	State IL	Zip Code 60679																				
Purpose of Disbursement Generic Travel	Category/ Type																					
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:																						

Amount of Each Disbursement this Period  
271.00

Full Name (Last, First, Middle Initial) <b>B. LAWRENCE R. TELFORD</b>		<b>Transaction ID:</b> B21B053106-1180 Date of Disbursement																				
Mailing Address 1208 TRIBAL COURT		<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>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	4		2	0	0	6													
City ARNOLD	State MD	Zip Code 21012																				
Purpose of Disbursement Generic Travel	Category/ Type																					
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:																						

Amount of Each Disbursement this Period  
58.60

Full Name (Last, First, Middle Initial) <b>C. LAWRENCE R. TELFORD</b>		<b>Transaction ID:</b> B21B053106-1181 Date of Disbursement																				
Mailing Address 1208 TRIBAL COURT		<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>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	4		2	0	0	6													
City ARNOLD	State MD	Zip Code 21012																				
Purpose of Disbursement Generic Travel	Category/ Type																					
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:																						

Amount of Each Disbursement this Period  
97.11

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

426.71

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LAWRENCE R. TELFORD</b>		<b>Transaction ID: B21B053106-1182</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1208 TRIBAL COURT		Amount of Each Disbursement this Period 2584.45
City ARNOLD State MD Zip Code 21012	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LAWRENCE R. TELFORD</b>		<b>Transaction ID: B21B053106-1183</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1208 TRIBAL COURT		Amount of Each Disbursement this Period 81.28
City ARNOLD State MD Zip Code 21012	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LAWRENCE R. TELFORD</b>		<b>Transaction ID: B21B053106-1184</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 1208 TRIBAL COURT		Amount of Each Disbursement this Period 58.18
City ARNOLD State MD Zip Code 21012	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2723.91
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LAWRENCE R. TELFORD</b>		<b>Transaction ID:</b> B21B053106-1185
Mailing Address 1208 TRIBAL COURT		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City ARNOLD	State MD	Zip Code 21012
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <b>2580.60</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JAMES E. TYRRELL</b>		<b>Transaction ID:</b> B21B053106-1186
Mailing Address 1537 COLONIAL TERRACE APT. C		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <b>943.19</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JAMES E. TYRRELL</b>		<b>Transaction ID:</b> B21B053106-1187
Mailing Address 1537 COLONIAL TERRACE APT. C		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <b>939.33</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4463.12</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SALLY A. VASTOLA</b>		<b>Transaction ID:</b> B21B053106-1188 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 109.30
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. SALLY A. VASTOLA</b>		<b>Transaction ID:</b> B21B053106-1189 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 109.30
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. ARCENEUX &amp; ASSOCIATES LLC</b>		<b>Transaction ID:</b> B21B053106-119 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 10597 JOHN AYRES DRIVE		Amount of Each Disbursement this Period 1000.00
City FAIRFAX State VA Zip Code 22032	Purpose of Disbursement Generic Political Consultant Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1218.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SALLY A. VASTOLA</b>		<b>Transaction ID:</b> B21B053106-1190 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 85.80
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. SALLY A. VASTOLA</b>		<b>Transaction ID:</b> B21B053106-1191 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 109.30
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. SALLY A. VASTOLA</b>		<b>Transaction ID:</b> B21B053106-1192 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 217.10
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	412.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SALLY A. VASTOLA</b>		<b>Transaction ID: B21B053106-1193</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 97.30	
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>B. SALLY A. VASTOLA</b>		<b>Transaction ID: B21B053106-1194</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 3239.46	
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Salaries	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>C. SALLY A. VASTOLA</b>		<b>Transaction ID: B21B053106-1195</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 368.13	
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Travel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3704.89</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SALLY A. VASTOLA</b>		<b>Transaction ID: B21B053106-1196</b>	
Mailing Address 154 PARK LEDGE DR.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City SNYDER	State NY	Zip Code 14226	Amount of Each Disbursement this Period 566.21
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. SALLY A. VASTOLA</b>		<b>Transaction ID: B21B053106-1197</b>	
Mailing Address 154 PARK LEDGE DR.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City SNYDER	State NY	Zip Code 14226	Amount of Each Disbursement this Period 19.70
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. SALLY A. VASTOLA</b>		<b>Transaction ID: B21B053106-1198</b>	
Mailing Address 154 PARK LEDGE DR.		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006	
City SNYDER	State NY	Zip Code 14226	Amount of Each Disbursement this Period 3239.46
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3825.37</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SALLY A. VASTOLA</b>		<b>Transaction ID: B21B053106-1199</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 85.80
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. AT &amp; T</b>		<b>Transaction ID: B21B053106-120</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 8000-862-5685 P.O. BOX 830120		Amount of Each Disbursement this Period 1925.59
City BALTIMORE State MD Zip Code 21283-0120	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. SALLY A. VASTOLA</b>		<b>Transaction ID: B21B053106-1200</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 217.10
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2228.49</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SALLY A. VASTOLA</b>		<b>Transaction ID:</b> B21B053106-1201 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 109.30
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. SALLY A. VASTOLA</b>		<b>Transaction ID:</b> B21B053106-1202 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 85.80
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. SALLY A. VASTOLA</b>		<b>Transaction ID:</b> B21B053106-1203 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 154 PARK LEDGE DR.		Amount of Each Disbursement this Period 74.80
City SNYDER State NY Zip Code 14226	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	269.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER J. WARD</b>		<b>Transaction ID:</b> B21B053106-1204 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 6302 MASSACHUSETTS AVENUE		Amount of Each Disbursement this Period 3078.91
City BETHESDA State MD Zip Code 20816	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER J. WARD</b>		<b>Transaction ID:</b> B21B053106-1205 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 6302 MASSACHUSETTS AVENUE		Amount of Each Disbursement this Period 3069.03
City BETHESDA State MD Zip Code 20816	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1206 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 337.10
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6485.04
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1207	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period  219.78
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1208	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period  162.22
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1209	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period  57.27
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>439.27</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T - UNIVERSAL BILLER</b>		<b>Transaction ID:</b> B21B053106-121 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address ACCT 171 788 3441 932 P.O. BOX 830120		Amount of Each Disbursement this Period 685.27
City BALTIMORE State MD Zip Code 21283-0120	Category/ Type	
Purpose of Disbursement Generic Telephone Long Distance		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1210 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 30.71
City RICHMOND State VA Zip Code 23230	Category/ Type	
Purpose of Disbursement Generic Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1211 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 20.00
City RICHMOND State VA Zip Code 23230	Category/ Type	
Purpose of Disbursement Generic Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	735.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RONALD A. WHITAKER</b>		<b>Transaction ID: B21B053106-1212</b>	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period 1689.74
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. RONALD A. WHITAKER</b>		<b>Transaction ID: B21B053106-1213</b>	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period 248.60
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. RONALD A. WHITAKER</b>		<b>Transaction ID: B21B053106-1214</b>	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period 110.74
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2049.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1215 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 177.88
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1216 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 155.35
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1217 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 135.03
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	468.26
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1218 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 838.20
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. RONALD A. WHITAKER</b>		<b>Transaction ID:</b> B21B053106-1219 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 326.08
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BALMAR INC.</b>		<b>Transaction ID:</b> B21B053106-122 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address ATTN: ACCOUNTS PAYABLE P.O. BOX 3330		Amount of Each Disbursement this Period 256.00
City MERRIFIELD State VA Zip Code 22116-3330	Purpose of Disbursement Generic Printing	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1420.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RONALD A. WHITAKER</b>		<b>Transaction ID: B21B053106-1220</b> Date of Disbursement MM / DD / YYYY 05 / 25 / 2006	
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 299.05	
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. RONALD A. WHITAKER</b>		<b>Transaction ID: B21B053106-1221</b> Date of Disbursement MM / DD / YYYY 05 / 25 / 2006	
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 115.35	
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. RONALD A. WHITAKER</b>		<b>Transaction ID: B21B053106-1222</b> Date of Disbursement MM / DD / YYYY 05 / 25 / 2006	
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 56.17	
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	470.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RONALD A. WHITAKER</b>		<b>Transaction ID: B21B053106-1223</b>	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period 1685.88
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. KATHLEEN A. WILBER</b>		<b>Transaction ID: B21B053106-1224</b>	
Mailing Address 2400 S. GLEBE RD. #215		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 48.00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. KATHLEEN A. WILBER</b>		<b>Transaction ID: B21B053106-1225</b>	
Mailing Address 2400 S. GLEBE RD. #215		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 12.67
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1746.55</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KATHLEEN A. WILBER</b>		<b>Transaction ID:</b> B21B053106-1226 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2400 S. GLEBE RD. #215		Amount of Each Disbursement this Period 1199.57
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KATHLEEN A. WILBER</b>		<b>Transaction ID:</b> B21B053106-1227 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2400 S. GLEBE RD. #215		Amount of Each Disbursement this Period 1195.70
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WILLIAM B. WYKPISZ</b>		<b>Transaction ID:</b> B21B053106-1228 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 12 CARRIAGE HOUSE CIRCLE		Amount of Each Disbursement this Period 1828.42
City ALEXANDRIA State VA Zip Code 22304		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4223.69
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WILLIAM B. WYKPI SZ</b>		Transaction ID: B21B053106-1229	
Mailing Address 12 CARRIAGE HOUSE CIRCLE		Date of Disbursement 05 / 26 / 2006	
City ALEXANDRIA	State VA	Zip Code 22304	Amount of Each Disbursement this Period 1824.54
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. BALMAR INC.</b>		Transaction ID: B21B053106-123	
Mailing Address ATTN: ACCOUNTS PAYABLE P.O. BOX 3330		Date of Disbursement 05 / 25 / 2006	
City MERRIFIELD	State VA	Zip Code 22116-3330	Amount of Each Disbursement this Period 14.71
Purpose of Disbursement Generic Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. JOE NICK WYNN</b>		Transaction ID: B21B053106-1230	
Mailing Address 6923 RIVERDALE RD.		Date of Disbursement 05 / 12 / 2006	
City LANHAM	State MD	Zip Code 20737	Amount of Each Disbursement this Period 1334.83
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3174.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1990 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE NICK WYNN</b>		<b>Transaction ID:</b> B21B053106-1231 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 6923 RIVERDALE RD.		Amount of Each Disbursement this Period 1330.96
City LANHAM State MD Zip Code 20737	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AQUIS COMMUNICATIONS INC.</b>		<b>Transaction ID:</b> B21B053106-124 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 64010		Amount of Each Disbursement this Period 41.11
City BALTIMORE State MD Zip Code 21264-4010	Purpose of Disbursement Generic Telephone Service	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AQUIS COMMUNICATIONS INC.</b>		<b>Transaction ID:</b> B21B053106-125 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 64010		Amount of Each Disbursement this Period 33.32
City BALTIMORE State MD Zip Code 21264-4010	Purpose of Disbursement Generic Telephone Service	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1405.39
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VERIZON CABS</b>		<b>Transaction ID:</b> B21B053106-126 Date of Disbursement
Mailing Address P.O. BOX 37205 ACCT: 202 M55-2176 105		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City BALTIMORE	State MD	Zip Code 21297-3205
Purpose of Disbursement Generic Telephone Service	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="726.40"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON</b>		<b>Transaction ID:</b> B21B053106-127 Date of Disbursement
Mailing Address ACCT. 000099643382 72Y P.O. BOX 17577		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City BALTIMORE	State MD	Zip Code 21297-0513
Purpose of Disbursement Generic Telephone Service	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="390.82"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BELL McANDREWS &amp; HILTACHK</b>		<b>Transaction ID:</b> B21B053106-128 Date of Disbursement
Mailing Address 455 CAPITOL MALL SUITE 801		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2006"/>
City SACRAMENTO	State CA	Zip Code 95814
Purpose of Disbursement Generic Legal Service	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="112.50"/>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1229.72"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BELL McANDREWS &amp; HILTACHK</b>		<b>Transaction ID: B21B053106-129</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 455 CAPITOL MALL SUITE 801		Amount of Each Disbursement this Period 75.00
City SACRAMENTO State CA Zip Code 95814		
Purpose of Disbursement Generic Legal Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BROADNET</b>		<b>Transaction ID: B21B053106-130</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3055 ROCKBRIDGE DRIVE SUITE 110		Amount of Each Disbursement this Period 2196.12
City HIGHLANDS RANCH State CO Zip Code 80129		
Purpose of Disbursement Generic DIRECT MAIL PRODUCTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BROADNET</b>		<b>Transaction ID: B21B053106-131</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3055 ROCKBRIDGE DRIVE SUITE 110		Amount of Each Disbursement this Period 2193.78
City HIGHLANDS RANCH State CO Zip Code 80129		
Purpose of Disbursement Generic DIRECT MAIL PRODUCTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4464.90</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BULK REGISTER</b>		<b>Transaction ID:</b> B21B053106-132 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 10 E. BALTIMORE STREET SUITE 1000		Amount of Each Disbursement this Period 35.96
City BALTIMORE State MD Zip Code 21202	Purpose of Disbursement Generic Subscriptions/Publications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. BULK REGISTER</b>		<b>Transaction ID:</b> B21B053106-133 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 10 E. BALTIMORE STREET SUITE 1000		Amount of Each Disbursement this Period 99.00
City BALTIMORE State MD Zip Code 21202	Purpose of Disbursement Generic Subscriptions/Publications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. BULK REGISTER</b>		<b>Transaction ID:</b> B21B053106-134 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 10 E. BALTIMORE STREET SUITE 1000		Amount of Each Disbursement this Period 24.00
City BALTIMORE State MD Zip Code 21202	Purpose of Disbursement Generic Subscriptions/Publications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	158.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1994 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BURLINGTON NORTHERN SANTA FE</b>		<b>Transaction ID: B21B053106-135</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 700 13TH STREET NW SUITE 220		Amount of Each Disbursement this Period 1978.80
City WASHINGTON State DC Zip Code 20005		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BURLINGTON NORTHERN SANTA FE</b>		<b>Transaction ID: B21B053106-136</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 700 13TH STREET NW SUITE 220		Amount of Each Disbursement this Period 1885.78
City WASHINGTON State DC Zip Code 20005		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BURLINGTON NORTHERN SANTA FE</b>		<b>Transaction ID: B21B053106-137</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 700 13TH STREET NW SUITE 220		Amount of Each Disbursement this Period 431.00
City WASHINGTON State DC Zip Code 20005		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4295.58</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1995 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BURLINGTON NORTHERN SANTA FE</b>		<b>Transaction ID: B21B053106-138</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 700 13TH STREET NW SUITE 220		Amount of Each Disbursement this Period 412.89
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		<b>Transaction ID: B21B053106-139</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 9622		Amount of Each Disbursement this Period 50.79
City MISSION HILLS State CA Zip Code 91346-9622	Purpose of Disbursement Generic Telephone Service	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WILRELESS</b>		<b>Transaction ID: B21B053106-140</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 17464		Amount of Each Disbursement this Period 5431.29
City BALTIMORE State MD Zip Code 21297-1464	Purpose of Disbursement Generic Telephone Service	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5894.97
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CAPITOL ENTERTAINMENT SERVICES INC.</b>		<b>Transaction ID:</b> B21B053106-141 Date of Disbursement
Mailing Address 3629 18TH STREET NE		<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20018
Purpose of Disbursement Generic Travel	<input type="text" value="300.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPITOL FLOURISH</b>		<b>Transaction ID:</b> B21B053106-142 Date of Disbursement
Mailing Address 12186 HICKORY KNOLL PLACE		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City FAIRFAX	State VA	Zip Code 22033
Purpose of Disbursement Generic Printing	<input type="text" value="1425.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-143 Date of Disbursement
Mailing Address 300 FIRST STREET SE		<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text" value="1950.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3675.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-144 Date of Disbursement
Mailing Address 300 FIRST STREET SE		<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text" value="80.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-145 Date of Disbursement
Mailing Address 300 FIRST STREET SE		<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text" value="406.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-146 Date of Disbursement
Mailing Address 300 FIRST STREET SE		<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text" value="239.52"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="725.52"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-147 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 1800.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-148 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 20.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-149 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 168.78
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1988.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1999 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-150 Date of Disbursement
Mailing Address 300 FIRST STREET SE		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text" value="283.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-151 Date of Disbursement
Mailing Address 300 FIRST STREET SE		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text" value="1200.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-152 Date of Disbursement
Mailing Address 300 FIRST STREET SE		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text" value="20.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1503.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2000 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-153 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 113.58
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-154 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 191.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-155 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 68.41
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	372.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2001 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-156 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 15.88
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-157 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 60.36
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		<b>Transaction ID:</b> B21B053106-158 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 3.14
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	79.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. STATE OF CALIFORNIA</b>		<b>Transaction ID:</b> B21B053106-159 Date of Disbursement
Mailing Address EMPLOYMENT DEVELOPMENT DEPT. P.O. BOX 826276		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="12"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City SACRAMENTO	State CA	Zip Code 94230
Purpose of Disbursement Generic Salaries	<input type="text" value="168.97"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STATE OF CALIFORNIA</b>		<b>Transaction ID:</b> B21B053106-160 Date of Disbursement
Mailing Address EMPLOYMENT DEVELOPMENT DEPT. P.O. BOX 826276		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City SACRAMENTO	State CA	Zip Code 94230
Purpose of Disbursement Generic Salaries	<input type="text" value="168.97"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAREFREE OFFICE TECHNOLOGY INC.</b>		<b>Transaction ID:</b> B21B053106-161 Date of Disbursement
Mailing Address 3928 PENDER DR. SUITE 210		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement Generic Office Supplies	<input type="text" value="259.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="596.94"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2003 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CAREFREE OFFICE TECHNOLOGY INC.</b>		<b>Transaction ID:</b> B21B053106-162 Date of Disbursement
Mailing Address 3928 PENDER DR. SUITE 210		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement Generic Office Supplies	<input type="text" value="81.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAREFREE OFFICE TECHNOLOGY INC.</b>		<b>Transaction ID:</b> B21B053106-163 Date of Disbursement
Mailing Address 3928 PENDER DR. SUITE 210		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement Generic Office Supplies	<input type="text" value="60.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAREFREE OFFICE TECHNOLOGY INC.</b>		<b>Transaction ID:</b> B21B053106-164 Date of Disbursement
Mailing Address 3928 PENDER DR. SUITE 210		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement Generic Office Supplies	<input type="text" value="154.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="295.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2004 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CAREFREE OFFICE TECHNOLOGY INC.</b>		<b>Transaction ID:</b> B21B053106-165 Date of Disbursement
Mailing Address 3928 PENDER DR. SUITE 210		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement Generic Office Supplies	<input type="text" value="209.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAREFREE OFFICE TECHNOLOGY INC.</b>		<b>Transaction ID:</b> B21B053106-166 Date of Disbursement
Mailing Address 3928 PENDER DR. SUITE 210		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement Generic Office Supplies	<input type="text" value="518.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAREFREE OFFICE TECHNOLOGY INC.</b>		<b>Transaction ID:</b> B21B053106-167 Date of Disbursement
Mailing Address 3928 PENDER DR. SUITE 210		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement Generic Office Supplies	<input type="text" value="162.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="889.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2005 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CAREFREE OFFICE TECHNOLOGY INC.</b>		<b>Transaction ID:</b> B21B053106-168 Date of Disbursement																				
Mailing Address 3928 PENDER DR. SUITE 210		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	8		2	0	0	6													
City FAIRFAX	State VA	Zip Code 22030																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>60.00</td></tr></table>	60.00																			
60.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN MEDIA ANALYSIS GROUP</b>		<b>Transaction ID:</b> B21B053106-169 Date of Disbursement																				
Mailing Address 2800 SHIRLINGTON ROAD # 700		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	8		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22206																				
Purpose of Disbursement Generic Political Consultant Fees		Amount of Each Disbursement this Period <table border="1"><tr><td>7700.00</td></tr></table>	7700.00																			
7700.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>C. COMMUNICATIONS EXPRESS</b>		<b>Transaction ID:</b> B21B053106-170 Date of Disbursement																				
Mailing Address 5407-C PORT ROYAL RD		<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>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	1		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22151																				
Purpose of Disbursement Generic Maintenance Equipment		Amount of Each Disbursement this Period <table border="1"><tr><td>945.00</td></tr></table>	945.00																			
945.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>8705.00</td></tr></table>	8705.00
8705.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2006 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. COMMUNICATIONS EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 5407-C PORT ROYAL RD

City SPRINGFIELD State VA Zip Code 22151

Purpose of Disbursement  
Generic Maintenance Equipment

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-171

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

54.34

B. CONFERENCE AMERICA INC.

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 241188

City MONTGOMERY State AL Zip Code 36124-1188

Purpose of Disbursement  
Generic Telephone Chairman

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-172

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

1547.39

C. CONGRESSIONAL LIQUORS

Full Name (Last, First, Middle Initial)

Mailing Address 404 1ST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Generic Catering Costs

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-173

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

10.42

SUBTOTAL of Disbursements This Page (optional) ▶

1612.15

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONGRESSIONAL LIQUORS</b>		<b>Transaction ID:</b> B21B053106-174 Date of Disbursement
Mailing Address 404 1ST STREET SE		<input type="text" value="05"/> <input type="text" value="MM"/> / <input type="text" value="11"/> <input type="text" value="DD"/> / <input type="text" value="20"/> <input type="text" value="YY"/> <input type="text" value="06"/> <input type="text" value="YY"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="21.18"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CONGRESSIONAL LIQUORS</b>		<b>Transaction ID:</b> B21B053106-175 Date of Disbursement
Mailing Address 404 1ST STREET SE		<input type="text" value="05"/> <input type="text" value="MM"/> / <input type="text" value="11"/> <input type="text" value="DD"/> / <input type="text" value="20"/> <input type="text" value="YY"/> <input type="text" value="06"/> <input type="text" value="YY"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="7.98"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CONGRESSIONAL LIQUORS</b>		<b>Transaction ID:</b> B21B053106-176 Date of Disbursement
Mailing Address 404 1ST STREET SE		<input type="text" value="05"/> <input type="text" value="MM"/> / <input type="text" value="25"/> <input type="text" value="DD"/> / <input type="text" value="20"/> <input type="text" value="YY"/> <input type="text" value="06"/> <input type="text" value="YY"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Catering Costs	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="27.30"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="56.46"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2008 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONGRESSIONAL LIQUORS</b>		<b>Transaction ID:</b> B21B053106-177 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 404 1ST STREET SE		Amount of Each Disbursement this Period 25.49
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Catering Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-178 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 3120.24
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-179 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 1000.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4145.85</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2009 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-180 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 100.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-181 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 400.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-182 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 500.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2010 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-183</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-184</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 1000.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-185</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 200.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1320.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2011 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-186</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 1000.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-187</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 2000.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-188</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 400.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3400.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2012 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-189</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 240.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-190</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 100.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-191</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 200.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	540.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2013 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-192 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 1000.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-193 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 1000.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-194 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 200.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2200.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2014 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-195</b>	
Mailing Address 300 KNICKERBOCKER RD.		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006	
City CRESSKILL	State NJ	Zip Code 07626	Amount of Each Disbursement this Period 120.12
Purpose of Disbursement Generic List Acquisition		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-196</b>	
Mailing Address 300 KNICKERBOCKER RD.		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006	
City CRESSKILL	State NJ	Zip Code 07626	Amount of Each Disbursement this Period 200.12
Purpose of Disbursement Generic List Acquisition		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-197</b>	
Mailing Address 300 KNICKERBOCKER RD.		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006	
City CRESSKILL	State NJ	Zip Code 07626	Amount of Each Disbursement this Period 500.12
Purpose of Disbursement Generic List Acquisition		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>820.36</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2015 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-198</b> Date of Disbursement 05 / 25 / 2006
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 100.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-199</b> Date of Disbursement 05 / 25 / 2006
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID: B21B053106-200</b> Date of Disbursement 05 / 25 / 2006
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 100.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	320.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2016 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-201 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.32
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-202 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.40
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-203 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.12
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	360.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2017 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-204 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.14
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-205 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.00
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-206 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.00
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	360.14
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2018 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-207	
Mailing Address 300 KNICKERBOCKER RD.		Date of Disbursement 05 / 25 / 2006	
City CRESSKILL	State NJ	Zip Code 07626	Amount of Each Disbursement this Period 120.14
Purpose of Disbursement Generic List Acquisition		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-208	
Mailing Address 300 KNICKERBOCKER RD.		Date of Disbursement 05 / 25 / 2006	
City CRESSKILL	State NJ	Zip Code 07626	Amount of Each Disbursement this Period 120.00
Purpose of Disbursement Generic List Acquisition		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-209	
Mailing Address 300 KNICKERBOCKER RD.		Date of Disbursement 05 / 25 / 2006	
City CRESSKILL	State NJ	Zip Code 07626	Amount of Each Disbursement this Period 120.36
Purpose of Disbursement Generic List Acquisition		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>360.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2019 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-210 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.60
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-211 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.00
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-212 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.00
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	360.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2020 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-213 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.00
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-214 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.00
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-215 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 384.64
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	624.64
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-216 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.00
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-217 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.14
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-218 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.18
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	360.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-219 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 801.09
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-220 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.00
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-221 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.18
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1041.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-222 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 813.63
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CONRAD DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-223 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 300 KNICKERBOCKER RD.		Amount of Each Disbursement this Period 120.00
City CRESSKILL State NJ Zip Code 07626	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CUSTOM SCOOP</b>		<b>Transaction ID:</b> B21B053106-224 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 609		Amount of Each Disbursement this Period 5000.00
City CONCORD State NH Zip Code 03302	Purpose of Disbursement Generic Subscriptions/Publications	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5933.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CUSTOM SCOOP</b>		<b>Transaction ID:</b> B21B053106-225 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 609		Amount of Each Disbursement this Period 5000.00
City CONCORD State NH Zip Code 03302	Purpose of Disbursement Generic Subscriptions/Publications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. DCDOES</b>		<b>Transaction ID:</b> B21B053106-226 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period .00
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. DCDOES</b>		<b>Transaction ID:</b> B21B053106-227 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period 19.62
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5019.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DCDOES</b>		<b>Transaction ID:</b> B21B053106-228 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period _____ .00
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. DCDOES</b>		<b>Transaction ID:</b> B21B053106-229 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period _____ 25.96
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. DCDOES</b>		<b>Transaction ID:</b> B21B053106-230 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period _____ 21.92
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	_____ <b>47.88</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DCDOES</b>		<b>Transaction ID:</b> B21B053106-231 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period 5.19
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. DCDOES</b>		<b>Transaction ID:</b> B21B053106-232 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period 20.31
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. DCDOES</b>		<b>Transaction ID:</b> B21B053106-233 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period .00
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	25.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2027 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DCDOES</b>		<b>Transaction ID: B21B053106-234</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period 14.42	
City WASHINGTON	State DC	Zip Code 20013	Category/ Type
Purpose of Disbursement Generic Payroll Tax			
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. DCDOES</b>		<b>Transaction ID: B21B053106-235</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period .00	
City WASHINGTON	State DC	Zip Code 20013	Category/ Type
Purpose of Disbursement Generic Payroll Tax			
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. DCDOES</b>		<b>Transaction ID: B21B053106-236</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period 25.96	
City WASHINGTON	State DC	Zip Code 20013	Category/ Type
Purpose of Disbursement Generic Payroll Tax			
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	40.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DCDOES</b>		<b>Transaction ID:</b> B21B053106-237 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period 1.27
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. DCDOES</b>		<b>Transaction ID:</b> B21B053106-238 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period .00
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. DCDOES</b>		<b>Transaction ID:</b> B21B053106-239 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address P.O. BOX 1582		Amount of Each Disbursement this Period 15.12
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	16.39
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-240 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-241 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="45.29"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-242 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="300.50"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="345.79"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-243 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="168.26"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-244 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="859.72"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-245 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="72.21"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1100.19"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-246 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text" value="719.14"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-247 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text" value=".00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-248 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text" value="45.29"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="764.43"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-249 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text" value="300.50"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-250 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text" value="168.26"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-251 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries	<input type="text" value="859.72"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1328.48"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-252 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <input type="text" value="72.21"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-253 Date of Disbursement
Mailing Address DISTRICT OF COLUMBIA DEPT. OF FINANCE & REVENUE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <input type="text" value="719.14"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-254 Date of Disbursement
Mailing Address OFFICE OF TAX AND REVENUE P.O. BOX 96384		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="18"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20090-6384
Purpose of Disbursement Generic Use Tax		Amount of Each Disbursement this Period <input type="text" value="641.98"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1433.33"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. D.C. TREASURER</b>		<b>Transaction ID:</b> B21B053106-255 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address OFFICE OF TAX AND REVENUE P.O. BOX 96384		Amount of Each Disbursement this Period _____ .00
City WASHINGTON	State DC	
Zip Code 20090-6384		_____ .00
Purpose of Disbursement Generic Tax Sales		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. DISH NETWORK</b>		<b>Transaction ID:</b> B21B053106-256 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address DEPT 0063		Amount of Each Disbursement this Period _____ 65.98
City PALATINE	State IL	
Zip Code 60055-0063		_____ 65.98
Purpose of Disbursement Generic Subscriptions/Publications		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. DISH NETWORK</b>		<b>Transaction ID:</b> B21B053106-257 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address DEPT 0063		Amount of Each Disbursement this Period _____ 59.39
City PALATINE	State IL	
Zip Code 60055-0063		_____ 59.39
Purpose of Disbursement Generic Subscriptions/Publications		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	_____ <b>125.37</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DM GROUP</b>		<b>Transaction ID: B21B053106-258</b>	
Mailing Address 231 SKIPJACK ROAD		Date of Disbursement 05 / 18 / 2006	
City PRINCE FREDERICK	State MD	Zip Code 20678	Amount of Each Disbursement this Period 2995.20
Purpose of Disbursement Generic Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. DM GROUP</b>		<b>Transaction ID: B21B053106-259</b>	
Mailing Address 231 SKIPJACK ROAD		Date of Disbursement 05 / 18 / 2006	
City PRINCE FREDERICK	State MD	Zip Code 20678	Amount of Each Disbursement this Period 2052.80
Purpose of Disbursement Generic Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. DM GROUP</b>		<b>Transaction ID: B21B053106-260</b>	
Mailing Address 231 SKIPJACK ROAD		Date of Disbursement 05 / 18 / 2006	
City PRINCE FREDERICK	State MD	Zip Code 20678	Amount of Each Disbursement this Period 2265.60
Purpose of Disbursement Generic Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**7313.60**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DM GROUP</b>		<b>Transaction ID:</b> B21B053106-261	
Mailing Address 231 SKIPJACK ROAD		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City PRINCE FREDERICK	State MD	Zip Code 20678	Amount of Each Disbursement this Period 3415.80
Purpose of Disbursement Generic Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. DM GROUP</b>		<b>Transaction ID:</b> B21B053106-262	
Mailing Address 231 SKIPJACK ROAD		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City PRINCE FREDERICK	State MD	Zip Code 20678	Amount of Each Disbursement this Period 1560.89
Purpose of Disbursement Generic Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. DM GROUP</b>		<b>Transaction ID:</b> B21B053106-263	
Mailing Address 231 SKIPJACK ROAD		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City PRINCE FREDERICK	State MD	Zip Code 20678	Amount of Each Disbursement this Period 78809.18
Purpose of Disbursement Generic DIRECT MAIL PRODUCTION		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**83785.87**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DM GROUP</b>		<b>Transaction ID:</b> B21B053106-264	
Mailing Address 231 SKIPJACK ROAD		Date of Disbursement 05 / 18 / 2006	
City PRINCE FREDERICK	State MD	Zip Code 20678	Amount of Each Disbursement this Period 20800.00
Purpose of Disbursement Generic Postage		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. DM GROUP</b>		<b>Transaction ID:</b> B21B053106-265	
Mailing Address 231 SKIPJACK ROAD		Date of Disbursement 05 / 18 / 2006	
City PRINCE FREDERICK	State MD	Zip Code 20678	Amount of Each Disbursement this Period 19600.65
Purpose of Disbursement Generic Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. DM GROUP</b>		<b>Transaction ID:</b> B21B053106-266	
Mailing Address 231 SKIPJACK ROAD		Date of Disbursement 05 / 25 / 2006	
City PRINCE FREDERICK	State MD	Zip Code 20678	Amount of Each Disbursement this Period 25309.57
Purpose of Disbursement Generic Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>65710.22</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DAWSON McCARTHY NELSON MEDIA LLC</b>		<b>Transaction ID: B21B053106-267</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 1023 31ST ST. NW 4TH FLOOR		Amount of Each Disbursement this Period 10000.00
City WASHINGTON State DC Zip Code 20007		
Purpose of Disbursement Generic Political Consultant Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EPIPHANY PRODUCTIONS INC.</b>		<b>Transaction ID: B21B053106-268</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 104 EAST HUME AVENUE		Amount of Each Disbursement this Period 25000.00
City ALEXANDRIA State VA Zip Code 22301		
Purpose of Disbursement Generic Political Consultant Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EPIPHANY PRODUCTIONS INC.</b>		<b>Transaction ID: B21B053106-269</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 104 EAST HUME AVENUE		Amount of Each Disbursement this Period 24.69
City ALEXANDRIA State VA Zip Code 22301		
Purpose of Disbursement Generic Political Consultant Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>35024.69</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
EPIPHANY PRODUCTIONS INC.

Mailing Address 104 EAST HUME AVENUE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement  
Generic Political Consultant Fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-270  
Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

55740.00

**B.** Full Name (Last, First, Middle Initial)  
FEATHER LARSON & SYNHORST DCI

Mailing Address 2401 W. BEHREND DRIVE SUITE 7

City PHOENIX State AZ Zip Code 85027

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-271  
Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

10663.50

**C.** Full Name (Last, First, Middle Initial)  
FEATHER LARSON & SYNHORST DCI

Mailing Address 2401 W. BEHREND DRIVE SUITE 7

City PHOENIX State AZ Zip Code 85027

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-272  
Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

580.00

**SUBTOTAL** of Disbursements This Page (optional) .....

66983.50

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FEATHER LARSON &amp; SYNHORST DCI</b>		<b>Transaction ID:</b> B21B053106-273
Mailing Address 2401 W. BEHREND DRIVE SUITE 7		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City PHOENIX	State AZ	Zip Code 85027
Purpose of Disbursement Generic Phone Banks	Candidate Name	Amount of Each Disbursement this Period 10439.20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FEATHER LARSON &amp; SYNHORST DCI</b>		<b>Transaction ID:</b> B21B053106-274
Mailing Address 2401 W. BEHREND DRIVE SUITE 7		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City PHOENIX	State AZ	Zip Code 85027
Purpose of Disbursement Generic Phone Banks	Candidate Name	Amount of Each Disbursement this Period 9853.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FEATHER LARSON &amp; SYNHORST DCI</b>		<b>Transaction ID:</b> B21B053106-275
Mailing Address 2401 W. BEHREND DRIVE SUITE 7		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City PHOENIX	State AZ	Zip Code 85027
Purpose of Disbursement Generic Phone Banks	Candidate Name	Amount of Each Disbursement this Period 1316.65
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>21608.85</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FEATHER LARSON &amp; SYNHORST DCI</b>		<b>Transaction ID:</b> B21B053106-276
Mailing Address 2401 W. BEHREND DRIVE SUITE 7		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City PHOENIX	State AZ	Zip Code 85027
Purpose of Disbursement Generic Phone Banks		Amount of Each Disbursement this Period 17323.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-277
Mailing Address 1970 CHAIN BRIDGE ROAD		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax		Amount of Each Disbursement this Period .00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-278
Mailing Address 1970 CHAIN BRIDGE ROAD		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax		Amount of Each Disbursement this Period 7.69
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	17330.69
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-279 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period _____ .00
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax Candidate Name _____ Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-280 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period _____ 13.85
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax Candidate Name _____ Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-281 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period _____ .00
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax Candidate Name _____ Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	_____ <b>13.85</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-282 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-283 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-284 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1355.63"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID: B21B053106-285</b> Date of Disbursement 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 1377.00
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID: B21B053106-286</b> Date of Disbursement 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 602.44
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID: B21B053106-287</b> Date of Disbursement 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 1471.16
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3450.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-288 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	<input type="text" value="3048.24"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-289 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	<input type="text" value="1488.81"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-290 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	<input type="text" value="2231.15"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6768.20"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-291 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 3039.88
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-292 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 4299.70
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-293 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 1756.49
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9096.07
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-294 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 4540.47
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-295 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 8912.90
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-296 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 4476.62
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	17929.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-297 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 12 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 6358.40
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-298 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 26 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period .00
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-299 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 26 / 2006
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 7.69
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6366.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2049 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-300
Mailing Address 1970 CHAIN BRIDGE ROAD		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period .....00	

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-301
Mailing Address 1970 CHAIN BRIDGE ROAD		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period .....13.85	

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-302
Mailing Address 1970 CHAIN BRIDGE ROAD		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period .....00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	.....13.85
<b>TOTAL</b> This Period (last page this line number only) .....	▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-303 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period _____ .00
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax Candidate Name _____ Category/Type _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-304 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period _____ 8.06
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax Candidate Name _____ Category/Type _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-305 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period _____ 1347.57
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax Candidate Name _____ Category/Type _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1355.63</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-306 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	<input type="text" value="1377.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-307 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	<input type="text" value="602.44"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-308 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Payroll Tax	<input type="text" value="1471.16"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3450.60"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2052 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-309 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 3048.24
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-310 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 1488.81
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-311 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 2231.15
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Payroll Tax	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6768.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-312 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 3039.92
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-313 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 4299.73
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-314 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1970 CHAIN BRIDGE ROAD		Amount of Each Disbursement this Period 1756.53
City MCLEAN State VA Zip Code 22102	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9096.18
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-315 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Salaries	<input type="text" value="4540.49"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-316 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Salaries	<input type="text" value="8912.91"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-317 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Salaries	<input type="text" value="4476.67"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="17930.07"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WACHOVIA NA</b>		<b>Transaction ID:</b> B21B053106-318 Date of Disbursement
Mailing Address 1970 CHAIN BRIDGE ROAD		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement Generic Salaries		<input type="text" value="6358.41"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN SOLUTIONS</b>		<b>Transaction ID:</b> B21B053106-319 Date of Disbursement
Mailing Address THE DONATELLI GROUP 118 NORTH SAINT ASAPH STREET		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Generic Copywriting		<input type="text" value="4500.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGN SOLUTIONS</b>		<b>Transaction ID:</b> B21B053106-320 Date of Disbursement
Mailing Address THE DONATELLI GROUP 118 NORTH SAINT ASAPH STREET		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Generic Data Processing		<input type="text" value="10067.50"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="20925.91"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2056 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS**

**Transaction ID:** B21B053106-321

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

Mailing Address THE DONATELLI GROUP  
118 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS**

**Transaction ID:** B21B053106-322

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

Mailing Address THE DONATELLI GROUP  
118 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

288.82

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. HOON DESIGNS LLC**

**Transaction ID:** B21B053106-323

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	0	6

Mailing Address 2800 SHIRLINGTON RD  
SUITE 920

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
Generic Printing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

475.00

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2263.82

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. HVAC PRECISION SERVICES INC.</b>		<b>Transaction ID:</b> B21B053106-324 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 7610 LINDBERGH DRIVE		Amount of Each Disbursement this Period 196.50
City GAITHERSBURG State MD Zip Code 20879	Purpose of Disbursement Generic Maintenance Equipment	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-325 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 490 WHITE POND DRIVE		Amount of Each Disbursement this Period 23400.00
City AKRON State OH Zip Code 44320	Purpose of Disbursement Generic Thank You Postage & Production	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-326 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 490 WHITE POND DRIVE		Amount of Each Disbursement this Period 1306.86
City AKRON State OH Zip Code 44320	Purpose of Disbursement Generic Data Processing	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	24903.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-327

Date of Disbursement

/

Amount of Each Disbursement this Period

47014.91

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-328

Date of Disbursement

/

Amount of Each Disbursement this Period

491.53

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-329

Date of Disbursement

/

Amount of Each Disbursement this Period

650.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

48156.44

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2059 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-330

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

1703.89

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-331

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

11226.38

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-332

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

1311.20

**SUBTOTAL** of Disbursements This Page (optional) .....

14241.47

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-333

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

30797.15

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-334

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

6202.05

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-335

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

902.64

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

37901.84

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-336 Date of Disbursement
Mailing Address 490 WHITE POND DRIVE		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City AKRON	State OH	Zip Code 44320
Purpose of Disbursement Generic List Acquisition	<input type="text" value="75.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-337 Date of Disbursement
Mailing Address 490 WHITE POND DRIVE		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City AKRON	State OH	Zip Code 44320
Purpose of Disbursement Generic Data Processing	<input type="text" value="75.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-338 Date of Disbursement
Mailing Address 490 WHITE POND DRIVE		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City AKRON	State OH	Zip Code 44320
Purpose of Disbursement Generic Data Processing	<input type="text" value="312.90"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="462.90"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-339

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-340

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-341

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2063 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-342

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

130.02

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-343

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

100.00

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-344

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

330.02

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-345

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

100.00

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-346

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

250.02

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-347

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

250.02

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

600.04

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-348 Date of Disbursement
Mailing Address 490 WHITE POND DRIVE		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City AKRON	State OH	Zip Code 44320
Purpose of Disbursement Generic List Acquisition		Amount of Each Disbursement this Period <input type="text" value="100.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-349 Date of Disbursement
Mailing Address 490 WHITE POND DRIVE		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City AKRON	State OH	Zip Code 44320
Purpose of Disbursement Generic List Acquisition		Amount of Each Disbursement this Period <input type="text" value="100.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-350 Date of Disbursement
Mailing Address 490 WHITE POND DRIVE		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City AKRON	State OH	Zip Code 44320
Purpose of Disbursement Generic Data Processing		Amount of Each Disbursement this Period <input type="text" value="173.10"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="373.10"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-351
Mailing Address 490 WHITE POND DRIVE		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City AKRON	State OH	Amount of Each Disbursement this Period 100.00
Zip Code 44320		
Purpose of Disbursement Generic List Acquisition		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-352
Mailing Address 490 WHITE POND DRIVE		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City AKRON	State OH	Amount of Each Disbursement this Period 240.00
Zip Code 44320		
Purpose of Disbursement Generic Data Processing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. INTERNATIONAL DATA MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-353
Mailing Address 490 WHITE POND DRIVE		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City AKRON	State OH	Amount of Each Disbursement this Period 240.00
Zip Code 44320		
Purpose of Disbursement Generic Data Processing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>580.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2067 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Federal Major Donor Income

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-354

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

150.00

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-355

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

1267.41

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-356

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

240.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1657.41

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-357

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-358

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

240.00

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-359

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

75.00

**SUBTOTAL** of Disbursements This Page (optional) .....

390.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-360

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

639.39

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-361

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

1286.17

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-362

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

240.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2165.56

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2070 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-363

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

225.00

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Federal Major Donor Income

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-364

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

807.11

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Federal Major Donor Income

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-365

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

675.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1707.11

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-366

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

2983.36

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-367

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

135.02

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-368

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

130.02

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3248.40

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2072 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-369

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-370

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-371

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

3217.12

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

3417.12

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2073 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-372

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Data Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-373

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

315.00

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-374

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

565.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2074 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-375

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic List Acquisition

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-376

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320

Purpose of Disbursement  
Generic Thank You Postage & Production

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-377

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

23400.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

23600.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. INFOCISION MANAGEMENT CORP.</b>		<b>Transaction ID:</b> B21B053106-378 Date of Disbursement
Mailing Address 325 SPRINGSIDE DRIVE		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City AKRON	State OH	Zip Code 44333
Purpose of Disbursement Generic Phone Banks		Amount of Each Disbursement this Period <input type="text" value="91.14"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. INFOCISION MANAGEMENT CORP.</b>		<b>Transaction ID:</b> B21B053106-379 Date of Disbursement
Mailing Address 325 SPRINGSIDE DRIVE		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City AKRON	State OH	Zip Code 44333
Purpose of Disbursement Generic Phone Banks		Amount of Each Disbursement this Period <input type="text" value="53037.65"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. INFOCISION MANAGEMENT CORP.</b>		<b>Transaction ID:</b> B21B053106-380 Date of Disbursement
Mailing Address 325 SPRINGSIDE DRIVE		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City AKRON	State OH	Zip Code 44333
Purpose of Disbursement Generic Phone Banks		Amount of Each Disbursement this Period <input type="text" value="237970.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="291098.79"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
INFOCISION MANAGEMENT CORP.

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-381

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

3.00

B. Full Name (Last, First, Middle Initial)  
INFOCISION MANAGEMENT CORP.

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-382

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

21762.93

C. Full Name (Last, First, Middle Initial)  
INFOCISION MANAGEMENT CORP.

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-383

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

194980.00

SUBTOTAL of Disbursements This Page (optional) .....

216745.93

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
INFOCISION MANAGEMENT CORP.

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-384  
Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

25138.23

B. Full Name (Last, First, Middle Initial)  
INFOCISION MANAGEMENT CORP.

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-385  
Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

32800.27

C. Full Name (Last, First, Middle Initial)  
INFOCISION MANAGEMENT CORP.

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-386  
Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

211121.00

SUBTOTAL of Disbursements This Page (optional) ▶

269059.50

TOTAL This Period (last page this line number only) ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. INFOCISION MANAGEMENT CORP.</b>		<b>Transaction ID:</b> B21B053106-387 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 325 SPRINGSIDE DRIVE		Amount of Each Disbursement this Period 6528.97
City AKRON State OH Zip Code 44333	Purpose of Disbursement Generic Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. INFOCISION MANAGEMENT CORP.</b>		<b>Transaction ID:</b> B21B053106-388 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 325 SPRINGSIDE DRIVE		Amount of Each Disbursement this Period 730.75
City AKRON State OH Zip Code 44333	Purpose of Disbursement Generic Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. INFOCISION MANAGEMENT CORP.</b>		<b>Transaction ID:</b> B21B053106-389 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 325 SPRINGSIDE DRIVE		Amount of Each Disbursement this Period 252056.00
City AKRON State OH Zip Code 44333	Purpose of Disbursement Generic Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	259315.72
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2079 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. INFOCISION MANAGEMENT CORP.</b>		<b>Transaction ID:</b> B21B053106-390 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 325 SPRINGSIDE DRIVE		Amount of Each Disbursement this Period 55912.00
City AKRON State OH Zip Code 44333	Purpose of Disbursement Generic Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. INFOCISION MANAGEMENT CORP.</b>		<b>Transaction ID:</b> B21B053106-391 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 325 SPRINGSIDE DRIVE		Amount of Each Disbursement this Period 116639.00
City AKRON State OH Zip Code 44333	Purpose of Disbursement Generic Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. INSIGHT DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-392 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 78825		Amount of Each Disbursement this Period 8.86
City PHOENIX State AZ Zip Code 85062-8825	Purpose of Disbursement Generic Office Equipment (Under \$1000) Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	172559.86
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2080 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. INSIGHT DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-393 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 78825		Amount of Each Disbursement this Period 118.00
City PHOENIX State AZ Zip Code 85062-8825		
Purpose of Disbursement Generic Office Equipment (Under \$1000)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. INSIGHT DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-394 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 78825		Amount of Each Disbursement this Period .34
City PHOENIX State AZ Zip Code 85062-8825		
Purpose of Disbursement Generic Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. INSIGHT DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-395 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 78825		Amount of Each Disbursement this Period 6.79
City PHOENIX State AZ Zip Code 85062-8825		
Purpose of Disbursement Generic Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	125.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2081 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. INSIGHT DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-396 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 78825		Amount of Each Disbursement this Period 245.00
City PHOENIX State AZ Zip Code 85062-8825		
Purpose of Disbursement Generic Office Equipment (Under \$1000)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. INSIGHT DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-397 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 78825		Amount of Each Disbursement this Period 14.09
City PHOENIX State AZ Zip Code 85062-8825		
Purpose of Disbursement Generic Office Equipment (Under \$1000)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. INSIGHT DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-398 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 78825		Amount of Each Disbursement this Period 9.81
City PHOENIX State AZ Zip Code 85062-8825		
Purpose of Disbursement Generic Office Equipment (Under \$1000)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	268.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2082 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. IRON MOUNTAIN RECORDS MANAGEMENT</b>		<b>Transaction ID:</b> B21B053106-399 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 27128		Amount of Each Disbursement this Period 1323.49
City NEW YORK State NY Zip Code 10087-7128		
Purpose of Disbursement Generic Remodeling/Moving Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. KFOURY CONSTRUCTION GROUP</b>		<b>Transaction ID:</b> B21B053106-400 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 11307 SUNSET HILLS ROAD		Amount of Each Disbursement this Period 3210.00
City RESTON State VA Zip Code 20190-5231		
Purpose of Disbursement Generic Maintenance Equipment Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LEGAL LANGUAGE SERVICES</b>		<b>Transaction ID:</b> B21B053106-401 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 18 JOHN STREET SUITE 300		Amount of Each Disbursement this Period 450.00
City NEW YORK State NY Zip Code 10038-4011		
Purpose of Disbursement Generic Office Supplies Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4983.49
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE LUKENS COMPANY</b>		<b>Transaction ID:</b> B21B053106-402
Mailing Address 2800 SHIRLINGTON ROAD SUITE 401		Date of Disbursement 05 / 18 / 2006
City ARLINGTON	State VA	Zip Code 22206-3601
Purpose of Disbursement Generic Copywriting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 3088.28	

Full Name (Last, First, Middle Initial) <b>B. THE LUKENS COMPANY</b>		<b>Transaction ID:</b> B21B053106-403
Mailing Address 2800 SHIRLINGTON ROAD SUITE 401		Date of Disbursement 05 / 18 / 2006
City ARLINGTON	State VA	Zip Code 22206-3601
Purpose of Disbursement Generic Copywriting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 5590.62	

Full Name (Last, First, Middle Initial) <b>C. MAIL AMERICA COMMUNICATIONS INC.</b>		<b>Transaction ID:</b> B21B053106-404
Mailing Address 1174 ELKTON FARM ROAD		Date of Disbursement 05 / 11 / 2006
City FOREST	State VA	Zip Code 24551
Purpose of Disbursement Generic Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 17950.48	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>26629.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MAIL AMERICA COMMUNICATIONS INC.</b>		<b>Transaction ID:</b> B21B053106-405
Mailing Address 1174 ELKTON FARM ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City FOREST	State VA	Amount of Each Disbursement this Period 16404.20
Zip Code 24551		
Purpose of Disbursement Generic DIRECT MAIL PRODUCTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-406
Mailing Address P.O. BOX 13615		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City PHILADELPHIA	State PA	Amount of Each Disbursement this Period 386.21
Zip Code 19101-3615		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-407
Mailing Address P.O. BOX 13615		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City PHILADELPHIA	State PA	Amount of Each Disbursement this Period 5106.57
Zip Code 19101-3615		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>21896.98</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-408 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 2660.39
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-409 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 8282.14
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-410 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 6522.96
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	17465.49
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-411 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 4290.42
City PHILADELPHIA State PA Zip Code 19101-3615		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-412 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 4891.51
City PHILADELPHIA State PA Zip Code 19101-3615		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-413 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 1544.12
City PHILADELPHIA State PA Zip Code 19101-3615		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10726.05
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-414 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 3088.24
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance Cobra	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-415 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period .00
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-416 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 5106.57
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8194.81
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-417 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 2316.18
City PHILADELPHIA State PA Zip Code 19101-3615		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-418 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 7593.72
City PHILADELPHIA State PA Zip Code 19101-3615		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-419 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 5834.54
City PHILADELPHIA State PA Zip Code 19101-3615		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15744.44
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-420 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 4290.42
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-421 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 4933.33
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-422 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 1544.12
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

10767.87

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-423 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 469.67
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance Cobra Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-424 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period .00
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. MAMSI LIFE AND HEALTH</b>		<b>Transaction ID:</b> B21B053106-425 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 13615		Amount of Each Disbursement this Period 386.21
City PHILADELPHIA State PA Zip Code 19101-3615	Purpose of Disbursement Generic Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	855.88
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MARYLAND TREASURY COMPTROLLER</b>		<b>Transaction ID:</b> B21B053106-426 Date of Disbursement
Mailing Address MARYLAND INCOME TAX DIVISION WITHHOLDING SECTION		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ANNAPOLIS	State MD	Zip Code 21411
Purpose of Disbursement Generic Salaries	<input type="text" value="700.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARYLAND TREASURY COMPTROLLER</b>		<b>Transaction ID:</b> B21B053106-427 Date of Disbursement
Mailing Address MARYLAND INCOME TAX DIVISION WITHHOLDING SECTION		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ANNAPOLIS	State MD	Zip Code 21411
Purpose of Disbursement Generic Salaries	<input type="text" value="565.51"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MARYLAND TREASURY COMPTROLLER</b>		<b>Transaction ID:</b> B21B053106-428 Date of Disbursement
Mailing Address MARYLAND INCOME TAX DIVISION WITHHOLDING SECTION		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ANNAPOLIS	State MD	Zip Code 21411
Purpose of Disbursement Generic Salaries	<input type="text" value="262.04"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1527.55"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MARYLAND TREASURY COMPTROLLER</b>		Transaction ID: B21B053106-429 Date of Disbursement																				
Mailing Address MARYLAND INCOME TAX DIVISION WITHHOLDING SECTION		<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>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	2		2	0	0	6													
City ANNAPOLIS	State MD	Zip Code 21411																				
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <table border="1"><tr><td>627.01</td></tr></table>	627.01																			
627.01																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State:	District:																					

Full Name (Last, First, Middle Initial) <b>B. MARYLAND TREASURY COMPTROLLER</b>		Transaction ID: B21B053106-430 Date of Disbursement																				
Mailing Address MARYLAND INCOME TAX DIVISION WITHHOLDING SECTION		<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>5</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		2	6		2	0	0	6													
City ANNAPOLIS	State MD	Zip Code 21411																				
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <table border="1"><tr><td>700.00</td></tr></table>	700.00																			
700.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State:	District:																					

Full Name (Last, First, Middle Initial) <b>C. MARYLAND TREASURY COMPTROLLER</b>		Transaction ID: B21B053106-431 Date of Disbursement																				
Mailing Address MARYLAND INCOME TAX DIVISION WITHHOLDING SECTION		<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>5</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		2	6		2	0	0	6													
City ANNAPOLIS	State MD	Zip Code 21411																				
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <table border="1"><tr><td>565.51</td></tr></table>	565.51																			
565.51																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State:	District:																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>1892.52</td></tr></table>	1892.52
1892.52		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MARYLAND TREASURY COMPTROLLER</b>		<b>Transaction ID:</b> B21B053106-432
Mailing Address MARYLAND INCOME TAX DIVISION WITHHOLDING SECTION		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City ANNAPOLIS	State MD	Amount of Each Disbursement this Period  262.04
Zip Code 21411		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARYLAND TREASURY COMPTROLLER</b>		<b>Transaction ID:</b> B21B053106-433
Mailing Address MARYLAND INCOME TAX DIVISION WITHHOLDING SECTION		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City ANNAPOLIS	State MD	Amount of Each Disbursement this Period  627.01
Zip Code 21411		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MCGAHN &amp; ASSOCIATES PLLC</b>		<b>Transaction ID:</b> B21B053106-434
Mailing Address 601 PENNSYLVANIA AVENUE NW SUITE 900 SOUTH BUILDING		Date of Disbursement MM / DD / YYYY 05 / 01 / 2006
City WASHINGTON	State DC	Amount of Each Disbursement this Period  25000.00
Zip Code 20004		
Purpose of Disbursement Generic Political Consultant Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>25889.05</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. McGAHN &amp; ASSOCIATES PLLC</b>		<b>Transaction ID: B21B053106-435</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 601 PENNSYLVANIA AVENUE NW SUITE 900 SOUTH BUILDING		Amount of Each Disbursement this Period 3037.50
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement Generic Political Consultant Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. THE McINTOSH COMPANY</b>		<b>Transaction ID: B21B053106-436</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4505 SOUTHERN AVENUE		Amount of Each Disbursement this Period 1000.00
City DALLAS State TX Zip Code 75205	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. THE McINTOSH COMPANY</b>		<b>Transaction ID: B21B053106-437</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4505 SOUTHERN AVENUE		Amount of Each Disbursement this Period 17.28
City DALLAS State TX Zip Code 75205	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4054.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
MCLAUGHLIN & ASSOCIATES INC.

Mailing Address 919 PRINCE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Generic Survey  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: B21B053106-438  
Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

5290.00

B. Full Name (Last, First, Middle Initial)  
MDS COMMUNICATIONS

Mailing Address 545 W. JUANITA AVENUE

City MESA State AZ Zip Code 85210

Purpose of Disbursement  
Generic Phone Banks  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: B21B053106-439  
Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

280.00

C. Full Name (Last, First, Middle Initial)  
MDS COMMUNICATIONS

Mailing Address 545 W. JUANITA AVENUE

City MESA State AZ Zip Code 85210

Purpose of Disbursement  
Generic Phone Banks  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: B21B053106-440  
Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

20412.00

SUBTOTAL of Disbursements This Page (optional) ▶

25982.00

TOTAL This Period (last page this line number only) ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MDS COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-441 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 545 W. JUANITA AVENUE		Amount of Each Disbursement this Period 8434.50
City MESA State AZ Zip Code 85210	Purpose of Disbursement Generic Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. MDS COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-442 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 545 W. JUANITA AVENUE		Amount of Each Disbursement this Period 14738.00
City MESA State AZ Zip Code 85210	Purpose of Disbursement Generic Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. MDS COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-443 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 545 W. JUANITA AVENUE		Amount of Each Disbursement this Period 6228.00
City MESA State AZ Zip Code 85210	Purpose of Disbursement Generic Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	29400.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2097 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MDS COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-444 Date of Disbursement
Mailing Address 545 W. JUANITA AVENUE		<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MESA	State AZ	Zip Code 85210
Purpose of Disbursement Generic Phone Banks		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="865.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MDS COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-445 Date of Disbursement
Mailing Address 545 W. JUANITA AVENUE		<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MESA	State AZ	Zip Code 85210
Purpose of Disbursement Generic Phone Banks		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="9780.18"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MDS COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-446 Date of Disbursement
Mailing Address 545 W. JUANITA AVENUE		<input type="text" value="05"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MESA	State AZ	Zip Code 85210
Purpose of Disbursement Generic Phone Banks		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="30521.01"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="41166.19"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MERCURY PUBLIC AFFAIRS LLC</b>		<b>Transaction ID: B21B053106-447</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 137 FIFTH AVENUE 3RD FLOOR		Amount of Each Disbursement this Period 4692.00
City NEW YORK State NY Zip Code 10010	Purpose of Disbursement Generic Survey	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MHEITMAN ASSOCIATES LLC</b>		<b>Transaction ID: B21B053106-448</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 3517 SURREY DRIVE		Amount of Each Disbursement this Period 30000.00
City ALEXANDRIA State VA Zip Code 22309	Purpose of Disbursement Generic Political Consultant Fees	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MOBY DICK AIRWAYS LTD.</b>		<b>Transaction ID: B21B053106-449</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address P.O. BOX 77518		Amount of Each Disbursement this Period 10790.00
City WASHINGTON State DC Zip Code 20013-8518	Purpose of Disbursement Generic Travel	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	45482.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2099 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MOBY DICK AIRWAYS LTD.</b>		<b>Transaction ID:</b> B21B053106-450 Date of Disbursement
Mailing Address P.O. BOX 77518		<input type="text" value="05"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013-8518
Purpose of Disbursement Generic Travel	<input type="text" value="26583.50"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MOBY DICK AIRWAYS LTD.</b>		<b>Transaction ID:</b> B21B053106-451 Date of Disbursement
Mailing Address P.O. BOX 77518		<input type="text" value="05"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013-8518
Purpose of Disbursement Generic Travel	<input type="text" value="26583.50"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BURCH MUNFORD DIRECT</b>		<b>Transaction ID:</b> B21B053106-452 Date of Disbursement
Mailing Address 901 N. WASHINGTON STREET SUITE 300		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Generic Copywriting	<input type="text" value="4778.90"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="57945.90"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BURCH MUNFORD DIRECT</b>		Transaction ID: B21B053106-453 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 901 N. WASHINGTON STREET SUITE 300		Amount of Each Disbursement this Period 6222.94
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Disbursement Generic Copywriting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-454 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		Amount of Each Disbursement this Period 121.38
City ATLANTA State GA Zip Code 30374-0705		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-455 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		Amount of Each Disbursement this Period 138.16
City ATLANTA State GA Zip Code 30374-0705		
Purpose of Disbursement Generic Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6482.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-456 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2006"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="54.44"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-457 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2006"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="120.59"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-458 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2006"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="274.03"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="449.06"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-459 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text" value="131.45"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-460 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text" value="193.34"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-461 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text" value="121.38"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="446.17"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-462 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period <input type="text" value="121.37"/>	

Full Name (Last, First, Middle Initial) <b>B. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-463 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period <input type="text" value="54.44"/>	

Full Name (Last, First, Middle Initial) <b>C. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-464 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period <input type="text" value="144.45"/>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="320.26"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-465 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="25"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="271.91"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-466 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="25"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="131.45"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MUTUAL OF OMAHA INSURANCE CO.</b>		Transaction ID: B21B053106-467 Date of Disbursement
Mailing Address GROUP PREMIUM & ENROLLMENT SERVICE P.O. BOX 740705		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="25"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ATLANTA	State GA	Zip Code 30374-0705
Purpose of Disbursement Generic Insurance	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="200.76"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="604.12"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2105 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. NEOPOST LEASING</b>		<b>Transaction ID:</b> B21B053106-468 Date of Disbursement
Mailing Address P. O. BOX 45822		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SAN FRANCISCO	State CA	Zip Code 94145-0822
Purpose of Disbursement Generic Office Supplies	<input type="text" value="1372.96"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NEOPOST LEASING</b>		<b>Transaction ID:</b> B21B053106-469 Date of Disbursement
Mailing Address P. O. BOX 45822		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SAN FRANCISCO	State CA	Zip Code 94145-0822
Purpose of Disbursement Generic Use Tax	<input type="text" value="78.96"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NATIONAL NEWS AGENCY</b>		<b>Transaction ID:</b> B21B053106-470 Date of Disbursement
Mailing Address 4331 BLADENSBURG ROAD		<input type="text" value="05"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City BRENTWOOD	State MD	Zip Code 20722
Purpose of Disbursement Generic Subscriptions/Publications	<input type="text" value="154.08"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1606.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. NATIONAL NEWS AGENCY</b>		<b>Transaction ID:</b> B21B053106-471
Mailing Address 4331 BLADENSBURG ROAD		Date of Disbursement 05 / 25 / 2006
City BRENTWOOD	State MD	Zip Code 20722
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period 8.86
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NATIONAL NEWS AGENCY</b>		<b>Transaction ID:</b> B21B053106-472
Mailing Address 4331 BLADENSBURG ROAD		Date of Disbursement 05 / 25 / 2006
City BRENTWOOD	State MD	Zip Code 20722
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period 552.54
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NATIONAL NEWS AGENCY</b>		<b>Transaction ID:</b> B21B053106-473
Mailing Address 4331 BLADENSBURG ROAD		Date of Disbursement 05 / 25 / 2006
City BRENTWOOD	State MD	Zip Code 20722
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period 552.54
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1113.94</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. NATIONAL NEWS AGENCY</b>		<b>Transaction ID:</b> B21B053106-474 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 4331 BLADENSBURG ROAD		Amount of Each Disbursement this Period 31.77
City BRENTWOOD State MD Zip Code 20722	Purpose of Disbursement Generic Subscriptions/Publications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. NATIONAL NEWS AGENCY</b>		<b>Transaction ID:</b> B21B053106-475 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 4331 BLADENSBURG ROAD		Amount of Each Disbursement this Period 31.77
City BRENTWOOD State MD Zip Code 20722	Purpose of Disbursement Generic Subscriptions/Publications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. NEW YORK STATE DEPT. OF TAXATION AND</b>		<b>Transaction ID:</b> B21B053106-476 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address FINANCE W.A. HARRIMAN CAMPUS		Amount of Each Disbursement this Period 404.63
City ALBANY State NY Zip Code 12227	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	468.17
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. NEW YORK STATE DEPT. OF TAXATION AND</b>		<b>Transaction ID:</b> B21B053106-477 Date of Disbursement
Mailing Address FINANCE W.A. HARRIMAN CAMPUS		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ALBANY	State NY	Zip Code 12227
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <input type="text" value="404.63"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. OXFORD COMMUNICATIONS L.L.C.</b>		<b>Transaction ID:</b> B21B053106-478 Date of Disbursement
Mailing Address 121 SOUTH ALFRED STREET SUITE 6		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="18"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Generic Copywriting		Amount of Each Disbursement this Period <input type="text" value="11526.04"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. PABLO SANCHEZ</b>		<b>Transaction ID:</b> B21B053106-479 Date of Disbursement
Mailing Address 1032 N. DANVILLE STREET		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ARLINGTON	State VA	Zip Code 22201
Purpose of Disbursement Generic Cleaning Service		Amount of Each Disbursement this Period <input type="text" value="4724.75"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="16655.42"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PABLO SANCHEZ</b>		<b>Transaction ID:</b> B21B053106-480 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 1032 N. DANVILLE STREET		Amount of Each Disbursement this Period 4724.75
City ARLINGTON State VA Zip Code 22201	Purpose of Disbursement Generic Cleaning Service	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. PACIFIC PARKING</b>		<b>Transaction ID:</b> B21B053106-481 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 501 S. CAPITOL STREET SE		Amount of Each Disbursement this Period 2070.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Parking	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. PINNACLE LIST COMPANY INC</b>		<b>Transaction ID:</b> B21B053106-482 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 2800 SHIRLINGTON RD. SUITE 970		Amount of Each Disbursement this Period 735.00
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic List Acquisition	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7529.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PINNACLE LIST COMPANY INC</b>		<b>Transaction ID:</b> B21B053106-483
Mailing Address 2800 SHIRLINGTON RD. SUITE 970		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement Generic List Acquisition	Amount of Each Disbursement this Period 100.00	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PINNACLE LIST COMPANY INC</b>		<b>Transaction ID:</b> B21B053106-484
Mailing Address 2800 SHIRLINGTON RD. SUITE 970		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement Generic List Acquisition	Amount of Each Disbursement this Period 100.00	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PINNACLE LIST COMPANY INC</b>		<b>Transaction ID:</b> B21B053106-485
Mailing Address 2800 SHIRLINGTON RD. SUITE 970		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement Generic List Acquisition	Amount of Each Disbursement this Period 415.00	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>615.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2111 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PINNACLE LIST COMPANY INC</b>		<b>Transaction ID: B21B053106-486</b> Date of Disbursement
Mailing Address 2800 SHIRLINGTON RD. SUITE 970		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement Generic List Acquisition	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="485.00"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PINNACLE LIST COMPANY INC</b>		<b>Transaction ID: B21B053106-487</b> Date of Disbursement
Mailing Address 2800 SHIRLINGTON RD. SUITE 970		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement Generic List Acquisition	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="460.00"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PINNACLE LIST COMPANY INC</b>		<b>Transaction ID: B21B053106-488</b> Date of Disbursement
Mailing Address 2800 SHIRLINGTON RD. SUITE 970		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement Generic List Acquisition	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="705.00"/>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1650.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2112 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PINNACLE LIST COMPANY INC</b>		<b>Transaction ID:</b> B21B053106-489
Mailing Address 2800 SHIRLINGTON RD. SUITE 970		Date of Disbursement 05 / 25 / 2006
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement Generic List Acquisition	Amount of Each Disbursement this Period 615.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PREFERRED COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-490
Mailing Address 6090-D FRANCONIA ROAD		Date of Disbursement 05 / 18 / 2006
City ALEXANDRIA	State VA	Zip Code 22310
Purpose of Disbursement Generic List Acquisition	Amount of Each Disbursement this Period 120.40	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PREFERRED COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-491
Mailing Address 6090-D FRANCONIA ROAD		Date of Disbursement 05 / 18 / 2006
City ALEXANDRIA	State VA	Zip Code 22310
Purpose of Disbursement Generic List Acquisition	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1735.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> B21B053106-492																					
<b>A. PREFERRED COMMUNICATIONS</b>		Date of Disbursement																					
Mailing Address 6090-D FRANCONIA ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	6														
City ALEXANDRIA	State VA	Zip Code 22310	Amount of Each Disbursement this Period																				
Purpose of Disbursement Generic List Acquisition		Category/ Type	600.00																				
Candidate Name																							
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President	State: District:																						

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> B21B053106-493																					
<b>B. PREFERRED COMMUNICATIONS</b>		Date of Disbursement																					
Mailing Address 6090-D FRANCONIA ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	6														
City ALEXANDRIA	State VA	Zip Code 22310	Amount of Each Disbursement this Period																				
Purpose of Disbursement Generic List Acquisition		Category/ Type	600.40																				
Candidate Name																							
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President	State: District:																						

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> B21B053106-494																					
<b>C. PREFERRED COMMUNICATIONS</b>		Date of Disbursement																					
Mailing Address 6090-D FRANCONIA ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	6														
City ALEXANDRIA	State VA	Zip Code 22310	Amount of Each Disbursement this Period																				
Purpose of Disbursement Generic List Acquisition		Category/ Type	200.20																				
Candidate Name																							
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President	State: District:																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1400.60
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> B21B053106-495																					
<b>A. PREFERRED COMMUNICATIONS</b>		Date of Disbursement																					
Mailing Address 6090-D FRANCONIA ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	6														
City ALEXANDRIA	State VA	Zip Code 22310	Amount of Each Disbursement this Period																				
Purpose of Disbursement Generic List Acquisition		Category/ Type	1240.40																				
Candidate Name																							
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> B21B053106-496																					
<b>B. PREFERRED COMMUNICATIONS</b>		Date of Disbursement																					
Mailing Address 6090-D FRANCONIA ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	6														
City ALEXANDRIA	State VA	Zip Code 22310	Amount of Each Disbursement this Period																				
Purpose of Disbursement Generic List Acquisition		Category/ Type	120.00																				
Candidate Name																							
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> B21B053106-497																					
<b>C. PREFERRED COMMUNICATIONS</b>		Date of Disbursement																					
Mailing Address 6090-D FRANCONIA ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	6														
City ALEXANDRIA	State VA	Zip Code 22310	Amount of Each Disbursement this Period																				
Purpose of Disbursement Generic List Acquisition		Category/ Type	200.20																				
Candidate Name																							
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1560.60
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2115 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PREFERRED COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-498 Date of Disbursement
Mailing Address 6090-D FRANCONIA ROAD		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22310
Purpose of Disbursement Generic List Acquisition	<input type="text" value="240.20"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PREFERRED COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-499 Date of Disbursement
Mailing Address 6090-D FRANCONIA ROAD		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22310
Purpose of Disbursement Generic List Acquisition	<input type="text" value="887.50"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PREFERRED COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-500 Date of Disbursement
Mailing Address 6090-D FRANCONIA ROAD		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22310
Purpose of Disbursement Generic List Acquisition	<input type="text" value="1485.24"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2612.94"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2116 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PREFERRED COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-501
Mailing Address 6090-D FRANCONIA ROAD		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City ALEXANDRIA	State VA	Amount of Each Disbursement this Period 839.75
Zip Code 22310		
Purpose of Disbursement Generic List Acquisition		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PREFERRED COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-502
Mailing Address 6090-D FRANCONIA ROAD		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City ALEXANDRIA	State VA	Amount of Each Disbursement this Period 1250.00
Zip Code 22310		
Purpose of Disbursement Generic List Acquisition		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PREFERRED COMMUNICATIONS</b>		<b>Transaction ID:</b> B21B053106-503
Mailing Address 6090-D FRANCONIA ROAD		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City ALEXANDRIA	State VA	Amount of Each Disbursement this Period 3616.08
Zip Code 22310		
Purpose of Disbursement Generic List Acquisition		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5705.83</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2117 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> B21B053106-504																					
<b>A. PREFERRED COMMUNICATIONS</b>		Date of Disbursement																					
Mailing Address 6090-D FRANCONIA ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	6														
City ALEXANDRIA	State VA	Zip Code 22310	Amount of Each Disbursement this Period																				
Purpose of Disbursement Generic List Acquisition		Category/ Type	619.48																				
Candidate Name																							
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary	<input type="checkbox"/> General																					
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> B21B053106-505																					
<b>B. PREFERRED COMMUNICATIONS</b>		Date of Disbursement																					
Mailing Address 6090-D FRANCONIA ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	6														
City ALEXANDRIA	State VA	Zip Code 22310	Amount of Each Disbursement this Period																				
Purpose of Disbursement Generic List Acquisition		Category/ Type	844.08																				
Candidate Name																							
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary	<input type="checkbox"/> General																					
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> B21B053106-506																					
<b>C. PREFERRED COMMUNICATIONS</b>		Date of Disbursement																					
Mailing Address 6090-D FRANCONIA ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	6														
City ALEXANDRIA	State VA	Zip Code 22310	Amount of Each Disbursement this Period																				
Purpose of Disbursement Generic List Acquisition		Category/ Type	1478.75																				
Candidate Name																							
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary	<input type="checkbox"/> General																					
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2942.31
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2118 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. PUBLIC OPINION STRATEGIES**

**Transaction ID:** B21B053106-507  
Date of Disbursement

Mailing Address 214 NORTH FAYETTE STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

8250.00
---------

Purpose of Disbursement  
Generic Survey  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)  
**B. PUBLIC OPINION STRATEGIES**

**Transaction ID:** B21B053106-508  
Date of Disbursement

Mailing Address 214 NORTH FAYETTE STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

6800.00
---------

Purpose of Disbursement  
Generic Survey  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)  
**C. PUBLIC OPINION STRATEGIES**

**Transaction ID:** B21B053106-509  
Date of Disbursement

Mailing Address 214 NORTH FAYETTE STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

750.00
--------

Purpose of Disbursement  
Generic Survey  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

15800.00
----------

**TOTAL** This Period (last page this line number only) ..... ►

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2119 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. PUBLIC OPINION STRATEGIES**

**Transaction ID:** B21B053106-510  
Date of Disbursement

Mailing Address 214 NORTH FAYETTE STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

8250.00
---------

Purpose of Disbursement  
Generic Survey  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)  
**B. PUBLIC OPINION STRATEGIES**

**Transaction ID:** B21B053106-511  
Date of Disbursement

Mailing Address 214 NORTH FAYETTE STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	0	6

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

11000.00
----------

Purpose of Disbursement  
Generic Survey  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)  
**C. PUBLIC OPINION STRATEGIES**

**Transaction ID:** B21B053106-512  
Date of Disbursement

Mailing Address 214 NORTH FAYETTE STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	0	6

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

6800.00
---------

Purpose of Disbursement  
Generic Survey  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

26050.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Generic Survey

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-513

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

9000.00

**B. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Generic Survey

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-514

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

12500.00

**C. PUBLIC OPINION STRATEGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Generic Survey

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-515

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

6500.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

28000.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. QWEST</b>		Transaction ID: B21B053106-516 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address BUSINESS SERVICES ACCT. 70196868		Amount of Each Disbursement this Period 1049.57
City LOUISVILLE State KY Zip Code 40285-6169	Purpose of Disbursement Generic Telephone Long Distance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		Transaction ID: B21B053106-517 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 26.25
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		Transaction ID: B21B053106-518 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 151.20
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1227.02
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-519 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="1.51"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-520 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="67.47"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-521 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="23.04"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="92.02"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-522 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 11.88
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-523 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 9.55
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-524 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 19.58
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	41.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-525 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="42.32"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-526 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="10.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-527 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="15.79"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="68.11"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-528 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="32.87"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-529 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="18.41"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-530 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="9.76"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="61.04"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-531
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Candidate Name	Amount of Each Disbursement this Period 13.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-532
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Candidate Name	Amount of Each Disbursement this Period 89.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-533
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Candidate Name	Amount of Each Disbursement this Period 175.88
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>278.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2127 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A. JOE RAGAN'S OFFICE PRODUCTS**

Mailing Address 7518-G FULLERTON ROAD

City SPRINGFIELD State VA Zip Code 22153

Purpose of Disbursement  
Generic Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-534

Date of Disbursement

05 / 04 / 2006

Amount of Each Disbursement this Period

8.63

**B. JOE RAGAN'S OFFICE PRODUCTS**

Mailing Address 7518-G FULLERTON ROAD

City SPRINGFIELD State VA Zip Code 22153

Purpose of Disbursement  
Generic Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-535

Date of Disbursement

05 / 04 / 2006

Amount of Each Disbursement this Period

10.61

**C. JOE RAGAN'S OFFICE PRODUCTS**

Mailing Address 7518-G FULLERTON ROAD

City SPRINGFIELD State VA Zip Code 22153

Purpose of Disbursement  
Generic Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-536

Date of Disbursement

05 / 04 / 2006

Amount of Each Disbursement this Period

24.85

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

44.09

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-537
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 1.43	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-538
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 28.35	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-539
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 41.58	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>71.36</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-540 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	4		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>59.34</td></tr></table>	59.34																			
59.34																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-541 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	4		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>46.66</td></tr></table>	46.66																			
46.66																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-542 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	4		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>10.12</td></tr></table>	10.12																			
10.12																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>116.12</td></tr></table>	116.12
116.12		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-543
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
City SPRINGFIELD	State VA	Amount of Each Disbursement this Period <input type="text" value="131.32"/>
Zip Code 22153		
Purpose of Disbursement Generic Office Supplies		Category/ Type <input type="text"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-544
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
City SPRINGFIELD	State VA	Amount of Each Disbursement this Period <input type="text" value="7.55"/>
Zip Code 22153		
Purpose of Disbursement Generic Office Supplies		Category/ Type <input type="text"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-545
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
City SPRINGFIELD	State VA	Amount of Each Disbursement this Period <input type="text" value="101.83"/>
Zip Code 22153		
Purpose of Disbursement Generic Office Supplies		Category/ Type <input type="text"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="240.70"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-546 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="32.90"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-547 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="3.20"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-548 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="68.29"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="104.39"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-549 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	4		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:																						

Amount of Each Disbursement this Period  

11.86
-------

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-550 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	4		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:																						

Amount of Each Disbursement this Period  

64.75
-------

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-551 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	4		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:																						

Amount of Each Disbursement this Period  

29.85
-------

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>106.46</td></tr></table>	106.46
106.46		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. JOE RAGAN'S OFFICE PRODUCTS**

Mailing Address 7518-G FULLERTON ROAD

City SPRINGFIELD State VA Zip Code 22153

Purpose of Disbursement  
Generic Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-552

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

181.70

Full Name (Last, First, Middle Initial)  
**B. JOE RAGAN'S OFFICE PRODUCTS**

Mailing Address 7518-G FULLERTON ROAD

City SPRINGFIELD State VA Zip Code 22153

Purpose of Disbursement  
Generic Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-553

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

46.90

Full Name (Last, First, Middle Initial)  
**C. JOE RAGAN'S OFFICE PRODUCTS**

Mailing Address 7518-G FULLERTON ROAD

City SPRINGFIELD State VA Zip Code 22153

Purpose of Disbursement  
Generic Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-554

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

23.04

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

251.64

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-555 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="32.37"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-556 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="67.47"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-557 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="9.76"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="109.60"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2135 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-558 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="11"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="103.60"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-559 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="11"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="76.61"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-560 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="11"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="24.85"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="205.06"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-561
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 27.97	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-562
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 26.36	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-563
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 20.27	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>74.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-564 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="11"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="16.08"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-565 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="11"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="64.75"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-566 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="11"/> <input type="text" value="2006"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="29.85"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="110.68"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-567
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 29.85	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-568
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 227.50	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-569
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 8.23	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>265.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
JOE RAGAN'S OFFICE PRODUCTS

Mailing Address 7518-G FULLERTON ROAD

City SPRINGFIELD State VA Zip Code 22153

Purpose of Disbursement  
Generic Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-570

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

13.55

**B.** Full Name (Last, First, Middle Initial)  
JOE RAGAN'S OFFICE PRODUCTS

Mailing Address 7518-G FULLERTON ROAD

City SPRINGFIELD State VA Zip Code 22153

Purpose of Disbursement  
Generic Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-571

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

15.12

**C.** Full Name (Last, First, Middle Initial)  
JOE RAGAN'S OFFICE PRODUCTS

Mailing Address 7518-G FULLERTON ROAD

City SPRINGFIELD State VA Zip Code 22153

Purpose of Disbursement  
Generic Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-572

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

19.88

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

48.55

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-573
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 54.43	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-574
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 30.32	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-575
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 35.03	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>119.78</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-576
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 10.25	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-577
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 9.49	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-578
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 168.84	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>188.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. JOE RAGAN'S OFFICE PRODUCTS**

**Transaction ID:** B21B053106-579  
Date of Disbursement

Mailing Address 7518-G FULLERTON ROAD

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

City Springfield State VA Zip Code 22153

Amount of Each Disbursement this Period

Purpose of Disbursement  
Generic Office Supplies

Category/  
Type

114.91
--------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)  
**B. JOE RAGAN'S OFFICE PRODUCTS**

**Transaction ID:** B21B053106-580  
Date of Disbursement

Mailing Address 7518-G FULLERTON ROAD

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

City Springfield State VA Zip Code 22153

Amount of Each Disbursement this Period

Purpose of Disbursement  
Generic Office Supplies

Category/  
Type

28.00
-------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)  
**C. JOE RAGAN'S OFFICE PRODUCTS**

**Transaction ID:** B21B053106-581  
Date of Disbursement

Mailing Address 7518-G FULLERTON ROAD

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	6

City Springfield State VA Zip Code 22153

Amount of Each Disbursement this Period

Purpose of Disbursement  
Generic Office Supplies

Category/  
Type

24.45
-------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

167.36
--------

**TOTAL** This Period (last page this line number only) ..... ►

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-582
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 56.70	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-583
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 8.23	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-584
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 23.06	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>87.99</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-585 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="161.62"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-586 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="64.75"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-587 Date of Disbursement
Mailing Address 7518-G FULLERTON ROAD		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	<input type="text" value="29.85"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="256.22"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-588 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	8		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>29.85</td></tr></table>	29.85																			
29.85																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-589 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	8		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>112.56</td></tr></table>	112.56																			
112.56																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-590 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	8		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>114.91</td></tr></table>	114.91																			
114.91																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>257.32</td></tr></table>	257.32
257.32		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-591
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 18 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 9.55	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-592
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 18 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 2.94	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-593
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 18 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 5.95	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>18.44</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-594 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	8		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>29.25</td></tr></table>	29.25																			
29.25																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-595 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	8		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>15.82</td></tr></table>	15.82																			
15.82																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-596 Date of Disbursement																				
Mailing Address 7518-G FULLERTON ROAD		<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>5</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		2	5		2	0	0	6													
City SPRINGFIELD	State VA	Zip Code 22153																				
Purpose of Disbursement Generic Office Supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>64.75</td></tr></table>	64.75																			
64.75																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>109.82</td></tr></table>	109.82
109.82		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-597
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Candidate Name	Amount of Each Disbursement this Period 29.85
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-598
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Candidate Name	Amount of Each Disbursement this Period 23.04
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-599
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Candidate Name	Amount of Each Disbursement this Period 98.92
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>151.81</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-600 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 21.94
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-601 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 8.28
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-602 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 64.80
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	95.02
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-603
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 39.80	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-604
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 29.80	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-605
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 33.59	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>103.19</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-606 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 11.32
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-607 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 56.70
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-608 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 7518-G FULLERTON ROAD		Amount of Each Disbursement this Period 56.70
City SPRINGFIELD State VA Zip Code 22153	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	124.72
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-609
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 25 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 51.41	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-610
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 25 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 23.04	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOE RAGAN'S OFFICE PRODUCTS</b>		<b>Transaction ID:</b> B21B053106-611
Mailing Address 7518-G FULLERTON ROAD		Date of Disbursement 05 / 25 / 2006
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement Generic Office Supplies	Amount of Each Disbursement this Period 13.38	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>87.83</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. REFLECTIONS PHOTOGRAPHY INC.</b>		<b>Transaction ID:</b> B21B053106-612 Date of Disbursement
Mailing Address 631 PENNSYLVANIA AVE SE		<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Photography	<input type="text" value="662.12"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RICHIE HUMPHREYS</b>		<b>Transaction ID:</b> B21B053106-613 Date of Disbursement
Mailing Address 7727 WALNUT HILL LN		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2006"/>
City DALLAS	State TX	Zip Code 75230
Purpose of Disbursement Generic Photography	<input type="text" value="375.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RICHIE HUMPHREYS</b>		<b>Transaction ID:</b> B21B053106-614 Date of Disbursement
Mailing Address 7727 WALNUT HILL LN		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2006"/>
City DALLAS	State TX	Zip Code 75230
Purpose of Disbursement Generic Photography	<input type="text" value="50.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1087.12"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RICHIE HUMPHREYS</b>		<b>Transaction ID:</b> B21B053106-615 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 7727 WALNUT HILL LN		Amount of Each Disbursement this Period 35.00
City DALLAS State TX Zip Code 75230	Purpose of Disbursement Generic Photography	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-616 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 282.00
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-617 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 16.22
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	333.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-618 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 82.38
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-619 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 113.55
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-620 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 11.27
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	207.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-621 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 282.00
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-622 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 16.22
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-623 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 46.00
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	344.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-624 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 46.00
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-625 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 113.55
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-626 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 11.83
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	171.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-627 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 37.85
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-628 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 2.18
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-629 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 37.85
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	77.88
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-630 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 246.75
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-631 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 16.37
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-632 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 176.25
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	439.37
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-633 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 75.70
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-634 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 91.70
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. RIS PAPER COMPANY INC.</b>		<b>Transaction ID:</b> B21B053106-635 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 641617		Amount of Each Disbursement this Period 19.75
City PITTSBURGH State PA Zip Code 15264-1617	Purpose of Disbursement Generic Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	187.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. REAL MAGNET LLC</b>		<b>Transaction ID:</b> B21B053106-636 Date of Disbursement
Mailing Address 4853 CORDELL AVE PENTHOUSE 11		<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City BETHESDA	State MD	Zip Code 20814
Purpose of Disbursement Generic Data Processing	<input type="text" value="375.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. REPUBLICAN NATIONAL COMMITTEE</b>		<b>Transaction ID:</b> B21B053106-637 Date of Disbursement
Mailing Address 310 FIRST STREET SE		<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Satellite Services	<input type="text" value="4060.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. REPUBLICAN NATIONAL COMMITTEE</b>		<b>Transaction ID:</b> B21B053106-638 Date of Disbursement
Mailing Address 310 FIRST STREET SE		<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Issue Ad Production	<input type="text" value="50.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4485.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. REPUBLICAN NATIONAL COMMITTEE</b>		<b>Transaction ID:</b> B21B053106-639
Mailing Address 310 FIRST STREET SE		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City WASHINGTON	State DC	Amount of Each Disbursement this Period 1850.00
Zip Code 20003		
Purpose of Disbursement Generic Satellite Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ROLLING GREENS INC.</b>		<b>Transaction ID:</b> B21B053106-640
Mailing Address 7155 OLD ALEXANDRIA FERRY RD.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City CLINTON	State MD	Amount of Each Disbursement this Period 124.00
Zip Code 20735		
Purpose of Disbursement Generic Maintenance Equipment		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ROLLING GREENS INC.</b>		<b>Transaction ID:</b> B21B053106-641
Mailing Address 7155 OLD ALEXANDRIA FERRY RD.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City CLINTON	State MD	Amount of Each Disbursement this Period 7.13
Zip Code 20735		
Purpose of Disbursement Generic Maintenance Equipment		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1981.13

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RST MARKETING ASSOCIATES INC.</b>		<b>Transaction ID:</b> B21B053106-642 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK RD		Amount of Each Disbursement this Period 13572.00
City FOREST State VA Zip Code 24551	Purpose of Disbursement Generic Printing	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. RST MARKETING ASSOCIATES INC.</b>		<b>Transaction ID:</b> B21B053106-643 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK RD		Amount of Each Disbursement this Period 1360.00
City FOREST State VA Zip Code 24551	Purpose of Disbursement Generic Printing	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. RST MARKETING ASSOCIATES INC.</b>		<b>Transaction ID:</b> B21B053106-644 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK RD		Amount of Each Disbursement this Period 2754.00
City FOREST State VA Zip Code 24551	Purpose of Disbursement Generic Printing	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	17686.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RST MARKETING ASSOCIATES INC.</b>		<b>Transaction ID:</b> B21B053106-645 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK RD		Amount of Each Disbursement this Period 1944.00
City FOREST State VA Zip Code 24551	Purpose of Disbursement Generic Printing	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. RST MARKETING ASSOCIATES INC.</b>		<b>Transaction ID:</b> B21B053106-646 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK RD		Amount of Each Disbursement this Period 2560.00
City FOREST State VA Zip Code 24551	Purpose of Disbursement Generic Printing	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. RST MARKETING ASSOCIATES INC.</b>		<b>Transaction ID:</b> B21B053106-647 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK RD		Amount of Each Disbursement this Period 29342.18
City FOREST State VA Zip Code 24551	Purpose of Disbursement Generic DIRECT MAIL PRODUCTION	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>33846.18</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RST MARKETING ASSOCIATES INC.</b>		<b>Transaction ID:</b> B21B053106-648 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1272 CORPORATE PARK RD		Amount of Each Disbursement this Period _____ .00
City FOREST State VA Zip Code 24551		
Purpose of Disbursement Generic DIRECT MAIL PRODUCTION	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. SES AMERICOM INC.</b>		<b>Transaction ID:</b> B21B053106-649 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 8500-1316		Amount of Each Disbursement this Period _____ 4127.50
City PHILADELPHIA State PA Zip Code 19178-1316		
Purpose of Disbursement Generic Satellite Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. SES AMERICOM INC.</b>		<b>Transaction ID:</b> B21B053106-650 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 8500-1316		Amount of Each Disbursement this Period _____ 2040.00
City PHILADELPHIA State PA Zip Code 19178-1316		
Purpose of Disbursement Generic Satellite Services	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>6167.50</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SKYTEL INC.</b>		Transaction ID: B21B053106-651 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address P.O. BOX 70849		Amount of Each Disbursement this Period 1741.25	
City CHARLOTTE State NC Zip Code 28272-0849	Purpose of Disbursement Generic Telephone Service	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>B. SMARTECH CORPORATION</b>		Transaction ID: B21B053106-652 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address P.O. BOX 11181		Amount of Each Disbursement this Period 59.90	
City CHATTANOOGA State TN Zip Code 37401-2181	Purpose of Disbursement Generic Web Hosting	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>C. SMARTECH CORPORATION</b>		Transaction ID: B21B053106-653 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address P.O. BOX 11181		Amount of Each Disbursement this Period 38.41	
City CHATTANOOGA State TN Zip Code 37401-2181	Purpose of Disbursement Generic Web Hosting	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1839.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SMS DIRECT INC.</b>		<b>Transaction ID:</b> B21B053106-654 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 7540 MASON KING COURT		Amount of Each Disbursement this Period 75500.00
City MANASSAS State VA Zip Code 20109	Purpose of Disbursement Generic Postage	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. SPECTRUM WATER COOLERS INC.</b>		<b>Transaction ID:</b> B21B053106-655 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 605		Amount of Each Disbursement this Period 150.00
City MOBERLY State MO Zip Code 65270-0605	Purpose of Disbursement Generic Office Supplies	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. SPECTRUM WATER COOLERS INC.</b>		<b>Transaction ID:</b> B21B053106-656 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 605		Amount of Each Disbursement this Period 8.63
City MOBERLY State MO Zip Code 65270-0605	Purpose of Disbursement Generic Office Supplies	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	75658.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SPRINT</b>		<b>Transaction ID:</b> B21B053106-657	
Mailing Address P.O. BOX 930331		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City ATLANTA	State GA	Zip Code 31193	Amount of Each Disbursement this Period  1053.00
Purpose of Disbursement Generic Telephone Service		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. SPRINT</b>		<b>Transaction ID:</b> B21B053106-658	
Mailing Address P.O. BOX 930331		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City ATLANTA	State GA	Zip Code 31193	Amount of Each Disbursement this Period  21.90
Purpose of Disbursement Generic Telephone Service		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST PUBLISHING &amp; MAILING</b>		<b>Transaction ID:</b> B21B053106-659	
Mailing Address P.O. BOX 376		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City TOPEKA	State KS	Zip Code 66601-0376	Amount of Each Disbursement this Period  135711.39
Purpose of Disbursement Generic Postage		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>136786.29</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST PUBLISHING &amp; MAILING</b>		<b>Transaction ID:</b> B21B053106-660
Mailing Address P.O. BOX 376		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City TOPEKA	State KS	Zip Code 66601-0376
Purpose of Disbursement Generic Postage		Amount of Each Disbursement this Period 41100.00
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST PUBLISHING &amp; MAILING</b>		<b>Transaction ID:</b> B21B053106-661
Mailing Address P.O. BOX 376		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City TOPEKA	State KS	Zip Code 66601-0376
Purpose of Disbursement Generic Printing		Amount of Each Disbursement this Period 39281.39
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST PUBLISHING &amp; MAILING</b>		<b>Transaction ID:</b> B21B053106-662
Mailing Address P.O. BOX 376		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City TOPEKA	State KS	Zip Code 66601-0376
Purpose of Disbursement Generic DIRECT MAIL PRODUCTION		Amount of Each Disbursement this Period 12542.84
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>92924.23</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST PUBLISHING &amp; MAILING</b>		<b>Transaction ID:</b> B21B053106-663 Date of Disbursement
Mailing Address P.O. BOX 376		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City TOPEKA	State KS	Zip Code 66601-0376
Purpose of Disbursement Generic Postage	<input type="text" value="29258.34"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST PUBLISHING &amp; MAILING</b>		<b>Transaction ID:</b> B21B053106-664 Date of Disbursement
Mailing Address P.O. BOX 376		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City TOPEKA	State KS	Zip Code 66601-0376
Purpose of Disbursement Generic Postage	<input type="text" value="17490.77"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MIKE STOKKE</b>		<b>Transaction ID:</b> B21B053106-665 Date of Disbursement
Mailing Address RR 13 BOX 85		<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City BLOOMINGTON	State IL	Zip Code 61704
Purpose of Disbursement Generic Travel	<input type="text" value="97.01"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="46846.12"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-666

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

52564.20

**B.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-667

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

720.75

**C.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-668

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

791.70

**SUBTOTAL** of Disbursements This Page (optional) .....

54076.65

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-669

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

6531.11

**B.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-670

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

1533.00

**C.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-671

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

35309.46

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

43373.57

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2173 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-672

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

308.00

**B.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-673

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

59750.60

**C.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-674

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

620.85

**SUBTOTAL** of Disbursements This Page (optional) .....

60679.45

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2174 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-675

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

553.05

**B.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-676

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

1070.00

**C.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-677

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

59559.00

**SUBTOTAL** of Disbursements This Page (optional) .....

61182.05

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-678

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

2960.25

**B.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-679

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

746.00

**C.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-680

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

43192.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

46898.25

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2176 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-681

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

46347.60

**B.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-682

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

826.20

**C.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** B21B053106-683

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

417.45

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

47591.25

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-684

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

1715.10

**B.** STRATEGIC TELECOMMUNICATIONS INC.

Mailing Address 7591 9TH STREET NORTH

City OAKDALE State MN Zip Code 55128

Purpose of Disbursement  
Generic Phone Banks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-685

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

2670.75

**C.** TARGETPOINT CONSULTING

Mailing Address MICHAEL MEYERS  
107 S. WEST ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Generic Survey

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B21B053106-686

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

35000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

39385.85

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TARRANCE GROUP</b>		<b>Transaction ID:</b> B21B053106-687 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 201 NORTH UNION SUITE 410		Amount of Each Disbursement this Period 11997.00
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Disbursement Generic Survey		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. THE TARRANCE GROUP</b>		<b>Transaction ID:</b> B21B053106-688 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 201 NORTH UNION SUITE 410		Amount of Each Disbursement this Period 12777.00
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Disbursement Generic Survey		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. THE TARRANCE GROUP</b>		<b>Transaction ID:</b> B21B053106-689 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 201 NORTH UNION SUITE 410		Amount of Each Disbursement this Period 3705.00
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Disbursement Generic Survey		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	28479.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2179 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TARRANCE GROUP</b>		<b>Transaction ID:</b> B21B053106-690 Date of Disbursement
Mailing Address 201 NORTH UNION SUITE 410		<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Generic Survey	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="11460.00"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE TARRANCE GROUP</b>		<b>Transaction ID:</b> B21B053106-691 Date of Disbursement
Mailing Address 201 NORTH UNION SUITE 410		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Generic Survey	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="3279.00"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE TARRANCE GROUP</b>		<b>Transaction ID:</b> B21B053106-692 Date of Disbursement
Mailing Address 201 NORTH UNION SUITE 410		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Generic Survey	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="5830.00"/>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="20569.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TELTRONIC</b>		<b>Transaction ID:</b> B21B053106-693	
Mailing Address 7051-E MUIRKIRK MEADOWS DRIVE		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006	
City BELTSVILLE	State MD	Zip Code 20705	Amount of Each Disbursement this Period 210.00
Purpose of Disbursement Generic Maintenance Equipment		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. TELTRONIC</b>		<b>Transaction ID:</b> B21B053106-694	
Mailing Address 7051-E MUIRKIRK MEADOWS DRIVE		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006	
City BELTSVILLE	State MD	Zip Code 20705	Amount of Each Disbursement this Period 12.08
Purpose of Disbursement Generic Maintenance Equipment		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>C. TRANSAMERICA RETIREMENT SERVICES</b>		<b>Transaction ID:</b> B21B053106-695	
Mailing Address ATTN: GLORIA CLEVELAND T8-06 P.O. BOX 30368		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City LOS ANGELES	State CA	Zip Code 90099-9208	Amount of Each Disbursement this Period 579.75
Purpose of Disbursement Generic Maintenance Equipment		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	State: District:	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

801.83

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TRANSAMERICA EAST</b>		<b>Transaction ID:</b> B21B053106-696 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="1679.24"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TRANSAMERICA EAST</b>		<b>Transaction ID:</b> B21B053106-697 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="1298.09"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TRANSAMERICA EAST</b>		<b>Transaction ID:</b> B21B053106-698 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="2242.09"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5219.42"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2182 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TRANSAMERICA EAST</b>		Transaction ID: B21B053106-699 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="2707.38"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TRANSAMERICA EAST</b>		Transaction ID: B21B053106-700 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="1511.26"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TRANSAMERICA EAST</b>		Transaction ID: B21B053106-701 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="1025.16"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5243.80"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TRANSAMERICA EAST</b>		<b>Transaction ID:</b> B21B053106-702 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="2446.82"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TRANSAMERICA EAST</b>		<b>Transaction ID:</b> B21B053106-703 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="1679.24"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TRANSAMERICA EAST</b>		<b>Transaction ID:</b> B21B053106-704 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="1298.09"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5424.15"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TRANSAMERICA EAST</b>		Transaction ID: B21B053106-705 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <input type="text" value="2242.09"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. TRANSAMERICA EAST</b>		Transaction ID: B21B053106-706 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <input type="text" value="2707.38"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. TRANSAMERICA EAST</b>		Transaction ID: B21B053106-707 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <input type="text" value="1511.26"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6460.73"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TRANSAMERICA EAST</b>		<b>Transaction ID:</b> B21B053106-708 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="MM"/> / <input type="text" value="26"/> <input type="text" value="DD"/> / <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="YY"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="1025.16"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TRANSAMERICA EAST</b>		<b>Transaction ID:</b> B21B053106-709 Date of Disbursement
Mailing Address 100 - G EXECUTIVE DRIVE		<input type="text" value="05"/> <input type="text" value="MM"/> / <input type="text" value="26"/> <input type="text" value="DD"/> / <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="YY"/>
City EDGEWOOD	State NY	Zip Code 11717-8331
Purpose of Disbursement Generic Salaries	<input type="text" value="2446.82"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THOMAS REYNOLDS</b>		<b>Transaction ID:</b> B21B053106-710 Date of Disbursement
Mailing Address 500 ESSJAY RD SUITE 260		<input type="text" value="05"/> <input type="text" value="MM"/> / <input type="text" value="18"/> <input type="text" value="DD"/> / <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="YY"/>
City WILLIAMSVILLE	State NY	Zip Code 14221
Purpose of Disbursement Generic Travel	<input type="text" value="1769.15"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5241.13"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THOMAS REYNOLDS</b>		<b>Transaction ID:</b> B21B053106-711 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 500 ESSJAY RD SUITE 260		Amount of Each Disbursement this Period 123.27
City WILLIAMSVILLE State NY Zip Code 14221		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-712 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 221 PENNSYLVANNIA AVE S.E.		Amount of Each Disbursement this Period 4.50
City WASHINGTON State DC Zip Code 20003		
Purpose of Disbursement Generic Subscriptions/Publications		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-713 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 221 PENNSYLVANNIA AVE S.E.		Amount of Each Disbursement this Period 3.95
City WASHINGTON State DC Zip Code 20003		
Purpose of Disbursement Generic Subscriptions/Publications		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	131.72
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-714 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="4.95"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-715 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value=".77"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-716 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="3.99"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9.71"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-717 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="4.50"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-718 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="3.95"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-719 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="4.95"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="13.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-720 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="1.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-721 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="3.99"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-722 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="4.50"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9.49"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-723 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="3.95"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-724 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="4.95"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-725 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="1.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9.90"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-726 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="3.99"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-727 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="4.50"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-728 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="3.95"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="12.44"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-729 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="4.95"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-730 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="1.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-731 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="3.99"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9.94"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-732 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="25"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="4.50"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-733 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="25"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="3.95"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-734 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="25"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="4.95"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="13.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THE TROVER SHOP</b>		<b>Transaction ID:</b> B21B053106-735 Date of Disbursement
Mailing Address 221 PENNSYLVANNIA AVE S.E.		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="25"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Generic Subscriptions/Publications		Amount of Each Disbursement this Period <input type="text" value="1.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. U.S. POSTMASTER</b>		<b>Transaction ID:</b> B21B053106-736 Date of Disbursement
Mailing Address BRENTWOOD MAIN POST OFFICE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20013
Purpose of Disbursement Generic Postage		Amount of Each Disbursement this Period <input type="text" value="50000.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		<b>Transaction ID:</b> B21B053106-737 Date of Disbursement
Mailing Address P.O. BOX 7247-0244		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City PHILADELPHIA	State PA	Zip Code 19170-0001
Purpose of Disbursement Generic Postage		Amount of Each Disbursement this Period <input type="text" value="29.96"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="50030.96"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2195 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		<b>Transaction ID:</b> B21B053106-738 Date of Disbursement
Mailing Address P.O. BOX 7247-0244		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City PHILADELPHIA	State PA	Zip Code 19170-0001
Purpose of Disbursement Generic Postage	<input type="text" value="14.58"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		<b>Transaction ID:</b> B21B053106-739 Date of Disbursement
Mailing Address P.O. BOX 7247-0244		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City PHILADELPHIA	State PA	Zip Code 19170-0001
Purpose of Disbursement Generic Postage	<input type="text" value="1214.98"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		<b>Transaction ID:</b> B21B053106-740 Date of Disbursement
Mailing Address P.O. BOX 7247-0244		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City PHILADELPHIA	State PA	Zip Code 19170-0001
Purpose of Disbursement Generic Postage	<input type="text" value="13.84"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1243.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Transaction ID: B21B053106-741 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 333.31
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Transaction ID: B21B053106-742 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 41.27
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Transaction ID: B21B053106-743 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 11.45
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	386.03
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		<b>Transaction ID:</b> B21B053106-744 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 7.00
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		<b>Transaction ID:</b> B21B053106-745 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 48.43
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		<b>Transaction ID:</b> B21B053106-746 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 664.21
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	719.64
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Transaction ID: B21B053106-747 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 144.18
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Transaction ID: B21B053106-748 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 24.88
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Transaction ID: B21B053106-749 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 33.10
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	202.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Transaction ID: B21B053106-750 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 98.41
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Transaction ID: B21B053106-751 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 569.39
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Transaction ID: B21B053106-752 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 9.93
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	677.73
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		<b>Transaction ID:</b> B21B053106-753 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 254.73
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		<b>Transaction ID:</b> B21B053106-754 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 22.84
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		<b>Transaction ID:</b> B21B053106-755 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 270.77
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	548.34
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 2201 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Transaction ID: B21B053106-756 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 49.78
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Transaction ID: B21B053106-757 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 7.00
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Transaction ID: B21B053106-758 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 37.58
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	94.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2202 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		<b>Transaction ID:</b> B21B053106-759 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 531.19
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		<b>Transaction ID:</b> B21B053106-760 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 9.93
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		<b>Transaction ID:</b> B21B053106-761 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 82.92
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	624.04
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2203 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		<b>Transaction ID:</b> B21B053106-762 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 129.48
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		<b>Transaction ID:</b> B21B053106-763 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 18.37
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		<b>Transaction ID:</b> B21B053106-764 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 33.06
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	180.91
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2204 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		<b>Transaction ID:</b> B21B053106-765 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 70.21
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		<b>Transaction ID:</b> B21B053106-766 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 604.22
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		<b>Transaction ID:</b> B21B053106-767 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 90.64
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	765.07
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2205 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Transaction ID: B21B053106-768 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 217.20
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Transaction ID: B21B053106-769 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 27.17
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Transaction ID: B21B053106-770 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 7247-0244		Amount of Each Disbursement this Period 26.24
City PHILADELPHIA State PA Zip Code 19170-0001	Purpose of Disbursement Generic Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	270.61
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2206 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. U.S. MONITOR SERVICE</b>		<b>Transaction ID:</b> B21B053106-771 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 86 MAPLE AVENUE		Amount of Each Disbursement this Period 634.00
City NEW CITY State NY Zip Code 10956-5092	Purpose of Disbursement Generic Mailing Service	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. VERIZON BUSINESS</b>		<b>Transaction ID:</b> B21B053106-772 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 371392		Amount of Each Disbursement this Period 765.69
City PITTSBURGH State PA Zip Code 15250-7392	Purpose of Disbursement Generic Telephone Service	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. VERIZON BUSINESS</b>		<b>Transaction ID:</b> B21B053106-773 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address P.O. BOX 371392		Amount of Each Disbursement this Period 765.69
City PITTSBURGH State PA Zip Code 15250-7392	Purpose of Disbursement Generic Telephone Service	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2165.38</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID:</b> B21B053106-774 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		Amount of Each Disbursement this Period 260.68
City RICHMOND	State VA	
Zip Code 23212		Category/ Type
Purpose of Disbursement Generic Salaries		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID:</b> B21B053106-775 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		Amount of Each Disbursement this Period 482.92
City RICHMOND	State VA	
Zip Code 23212		Category/ Type
Purpose of Disbursement Generic Salaries		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID:</b> B21B053106-776 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		Amount of Each Disbursement this Period 47.66
City RICHMOND	State VA	
Zip Code 23212		Category/ Type
Purpose of Disbursement Generic Salaries		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	791.26
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID:</b> B21B053106-777 Date of Disbursement
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City RICHMOND	State VA	Zip Code 23212
Purpose of Disbursement Generic Salaries	<input type="text" value="383.27"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID:</b> B21B053106-778 Date of Disbursement
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City RICHMOND	State VA	Zip Code 23212
Purpose of Disbursement Generic Salaries	<input type="text" value="1077.82"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID:</b> B21B053106-779 Date of Disbursement
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City RICHMOND	State VA	Zip Code 23212
Purpose of Disbursement Generic Salaries	<input type="text" value="780.90"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2241.99"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID: B21B053106-780</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		Amount of Each Disbursement this Period 375.36
City RICHMOND	State VA	
Zip Code 23212		Category/ Type
Purpose of Disbursement Generic Salaries		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID: B21B053106-781</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		Amount of Each Disbursement this Period 260.68
City RICHMOND	State VA	
Zip Code 23212		Category/ Type
Purpose of Disbursement Generic Salaries		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID: B21B053106-782</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		Amount of Each Disbursement this Period 482.92
City RICHMOND	State VA	
Zip Code 23212		Category/ Type
Purpose of Disbursement Generic Salaries		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1118.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2210 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID: B21B053106-783</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		Amount of Each Disbursement this Period 47.66
City RICHMOND State VA Zip Code 23212		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID: B21B053106-784</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		Amount of Each Disbursement this Period 383.27
City RICHMOND State VA Zip Code 23212		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID: B21B053106-785</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		Amount of Each Disbursement this Period 1077.82
City RICHMOND State VA Zip Code 23212		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1508.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2211 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID:</b> B21B053106-786 Date of Disbursement
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City RICHMOND	State VA	Zip Code 23212
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <input type="text" value="780.90"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VIRGINIA DEPT. OF TAXATION</b>		<b>Transaction ID:</b> B21B053106-787 Date of Disbursement
Mailing Address PROCESSING SERVICE DIVISION P.O. BOX 1411		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City RICHMOND	State VA	Zip Code 23212
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <input type="text" value="375.36"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>		<b>Transaction ID:</b> B21B053106-788 Date of Disbursement
Mailing Address ACCT. 000128145230 85Y P.O. BOX 17577		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="25"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City BALTIMORE	State MD	Zip Code 21297-0513
Purpose of Disbursement Generic Telephone Long Distance		Amount of Each Disbursement this Period <input type="text" value="8398.23"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9554.49"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2212 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WASHINGTON COURIER</b>		<b>Transaction ID: B21B053106-789</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5520 CHEROKEE AVE SUITE 120		Amount of Each Disbursement this Period 99.08
City ALEXANDRIA State VA Zip Code 22312		
Purpose of Disbursement Generic Delivery Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WASHINGTON COURIER</b>		<b>Transaction ID: B21B053106-790</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5520 CHEROKEE AVE SUITE 120		Amount of Each Disbursement this Period 122.24
City ALEXANDRIA State VA Zip Code 22312		
Purpose of Disbursement Generic Delivery Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WASHINGTON COURIER</b>		<b>Transaction ID: B21B053106-791</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5520 CHEROKEE AVE SUITE 120		Amount of Each Disbursement this Period 187.54
City ALEXANDRIA State VA Zip Code 22312		
Purpose of Disbursement Generic Delivery Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	408.86
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2213 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WASHINGTON COURIER</b>		<b>Transaction ID: B21B053106-792</b> Date of Disbursement
Mailing Address 5520 CHEROKEE AVE SUITE 120		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22312
Purpose of Disbursement Generic Delivery Service	<input type="text" value="56.03"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WASHINGTON COURIER</b>		<b>Transaction ID: B21B053106-793</b> Date of Disbursement
Mailing Address 5520 CHEROKEE AVE SUITE 120		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22312
Purpose of Disbursement Generic Delivery Service	<input type="text" value="150.72"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DERBY H. WATKINS</b>		<b>Transaction ID: B21B053106-797</b> Date of Disbursement
Mailing Address 3232 WELLINGTON ROAD		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22302
Purpose of Disbursement Generic Copywriting	<input type="text" value="7442.40"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7649.15"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DERBY H. WATKINS</b>		<b>Transaction ID: B21B053106-798</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 3232 WELLINGTON ROAD		Amount of Each Disbursement this Period 7131.08
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement Generic Copywriting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. DERBY H. WATKINS</b>		<b>Transaction ID: B21B053106-799</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 3232 WELLINGTON ROAD		Amount of Each Disbursement this Period 8494.64
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement Generic Copywriting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. DERBY H. WATKINS</b>		<b>Transaction ID: B21B053106-800</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 3232 WELLINGTON ROAD		Amount of Each Disbursement this Period 11945.56
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement Generic Copywriting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	27571.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DERBY H. WATKINS</b>		<b>Transaction ID:</b> B21B053106-801 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 3232 WELLINGTON ROAD		Amount of Each Disbursement this Period 32024.00
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement Generic Copywriting	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DERBY H. WATKINS</b>		<b>Transaction ID:</b> B21B053106-802 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 3232 WELLINGTON ROAD		Amount of Each Disbursement this Period 10838.92
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement Generic DIRECT MAIL PRODUCTION	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WMATA</b>		<b>Transaction ID:</b> B21B053106-803 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 600 FIFTH STREET NW		Amount of Each Disbursement this Period 2045.00
City WASHINGTON State DC Zip Code 20001	Purpose of Disbursement Generic Parking	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **44907.92**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. XEROX CORPORATION</b>		<b>Transaction ID:</b> B21B053106-804
Mailing Address P.O. BOX 827181		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City PHILADELPHIA	State PA	Zip Code 19182-7181
Purpose of Disbursement Generic Xerox Expense	Amount of Each Disbursement this Period 2601.07	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. XEROX CORPORATION</b>		<b>Transaction ID:</b> B21B053106-805
Mailing Address P.O. BOX 827181		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City PHILADELPHIA	State PA	Zip Code 19182-7181
Purpose of Disbursement Generic Xerox Expense	Amount of Each Disbursement this Period 651.84	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. XEROX CORPORATION</b>		<b>Transaction ID:</b> B21B053106-806
Mailing Address P.O. BOX 827181		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City PHILADELPHIA	State PA	Zip Code 19182-7181
Purpose of Disbursement Generic Xerox Expense	Amount of Each Disbursement this Period 136.52	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3389.43</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. XEROX CORPORATION</b>		<b>Transaction ID:</b> B21B053106-807
Mailing Address P.O. BOX 827181		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006
City PHILADELPHIA	State PA	Zip Code 19182-7181
Purpose of Disbursement Generic Xerox Expense	Amount of Each Disbursement this Period 368.45	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARTIN R. BAKER</b>		<b>Transaction ID:</b> B21B053106-808
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City WASHINGTON	State DC	Zip Code 20037
Purpose of Disbursement Generic Travel	Amount of Each Disbursement this Period 371.33	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MARTIN R. BAKER</b>		<b>Transaction ID:</b> B21B053106-809
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City WASHINGTON	State DC	Zip Code 20037
Purpose of Disbursement Generic Travel	Amount of Each Disbursement this Period 175.41	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>915.19</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MARTIN R. BAKER</b>		<b>Transaction ID: B21B053106-810</b>	
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period  21.57
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. MARTIN R. BAKER</b>		<b>Transaction ID: B21B053106-811</b>	
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period  .00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. MARTIN R. BAKER</b>		<b>Transaction ID: B21B053106-812</b>	
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period  .00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	21.57
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MARTIN R. BAKER</b>		<b>Transaction ID: B21B053106-813</b>	
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period 40.00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. MARTIN R. BAKER</b>		<b>Transaction ID: B21B053106-814</b>	
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period 2250.78
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. MARTIN R. BAKER</b>		<b>Transaction ID: B21B053106-815</b>	
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period 557.21
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2847.99</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MARTIN R. BAKER</b>		<b>Transaction ID:</b> B21B053106-816
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City WASHINGTON	State DC	Amount of Each Disbursement this Period  128.26
Zip Code 20037		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARTIN R. BAKER</b>		<b>Transaction ID:</b> B21B053106-817
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City WASHINGTON	State DC	Amount of Each Disbursement this Period  118.64
Zip Code 20037		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MARTIN R. BAKER</b>		<b>Transaction ID:</b> B21B053106-818
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006
City WASHINGTON	State DC	Amount of Each Disbursement this Period  17.30
Zip Code 20037		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>264.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MARTIN R. BAKER</b>		<b>Transaction ID: B21B053106-819</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Amount of Each Disbursement this Period 54.50
City WASHINGTON State DC Zip Code 20037	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARTIN R. BAKER</b>		<b>Transaction ID: B21B053106-820</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1117 NEW HAMPSHIRE AVE. NW APT #9		Amount of Each Disbursement this Period 2246.90
City WASHINGTON State DC Zip Code 20037	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JONATHAN R. BLACK</b>		<b>Transaction ID: B21B053106-821</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3014 S. GLEBE RD		Amount of Each Disbursement this Period 756.60
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3058.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN R. BLACK</b>		<b>Transaction ID:</b> B21B053106-822 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3014 S. GLEBE RD		Amount of Each Disbursement this Period 44.88
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JONATHAN R. BLACK</b>		<b>Transaction ID:</b> B21B053106-823 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3014 S. GLEBE RD		Amount of Each Disbursement this Period 5.00
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JONATHAN R. BLACK</b>		<b>Transaction ID:</b> B21B053106-824 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 3014 S. GLEBE RD		Amount of Each Disbursement this Period 799.19
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	849.07
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN R. BLACK</b>		<b>Transaction ID: B21B053106-825</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 3014 S. GLEBE RD		Amount of Each Disbursement this Period 127.99
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Travel	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JONATHAN R. BLACK</b>		<b>Transaction ID: B21B053106-826</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 3014 S. GLEBE RD		Amount of Each Disbursement this Period 730.98
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Travel	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JONATHAN R. BLACK</b>		<b>Transaction ID: B21B053106-827</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 3014 S. GLEBE RD		Amount of Each Disbursement this Period 233.24
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Travel	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1092.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN R. BLACK</b>		<b>Transaction ID: B21B053106-828</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 3014 S. GLEBE RD		Amount of Each Disbursement this Period 1301.56
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. JONATHAN R. BLACK</b>		<b>Transaction ID: B21B053106-829</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 3014 S. GLEBE RD		Amount of Each Disbursement this Period 1297.70
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. JOSEPH M. BOLAND</b>		<b>Transaction ID: B21B053106-830</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2448 TUNLAW ROAD NW		Amount of Each Disbursement this Period 1537.47
City WASHINGTON State DC Zip Code 20007	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4136.73</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOSEPH M. BOLAND</b>		<b>Transaction ID: B21B053106-831</b> Date of Disbursement
Mailing Address 2448 TUNLAW ROAD NW		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20007
Purpose of Disbursement Generic Salaries	<input type="text" value="1533.61"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANDREA K. BOZEK</b>		<b>Transaction ID: B21B053106-832</b> Date of Disbursement
Mailing Address 1800 SOUTH JOYCE ST. APT. #1		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement Generic Travel	<input type="text" value="28.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANDREA K. BOZEK</b>		<b>Transaction ID: B21B053106-833</b> Date of Disbursement
Mailing Address 1800 SOUTH JOYCE ST. APT. #1		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="12"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement Generic Salaries	<input type="text" value="722.99"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2284.60"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ANDREA K. BOZEK</b>		<b>Transaction ID: B21B053106-834</b>	
Mailing Address 1800 SOUTH JOYCE ST. APT. #1		Date of Disbursement 05 / 25 / 2006	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period 54.37
Purpose of Disbursement Generic Travel		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ANDREA K. BOZEK</b>		<b>Transaction ID: B21B053106-835</b>	
Mailing Address 1800 SOUTH JOYCE ST. APT. #1		Date of Disbursement 05 / 25 / 2006	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period 15.74
Purpose of Disbursement Generic Travel		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ANDREA K. BOZEK</b>		<b>Transaction ID: B21B053106-836</b>	
Mailing Address 1800 SOUTH JOYCE ST. APT. #1		Date of Disbursement 05 / 26 / 2006	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period 719.11
Purpose of Disbursement Generic Salaries		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>789.22</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICHAEL P. BRADY</b>		<b>Transaction ID: B21B053106-837</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 4600 SOUTH FOUR MILE RUN #701		Amount of Each Disbursement this Period 3126.20
City ARLINGTON State VA Zip Code 22204		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL P. BRADY</b>		<b>Transaction ID: B21B053106-838</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 4600 SOUTH FOUR MILE RUN #701		Amount of Each Disbursement this Period 3122.33
City ARLINGTON State VA Zip Code 22204		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM BENJAMIN BRYANT</b>		<b>Transaction ID: B21B053106-839</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1919 DINWIDDIE STREET		Amount of Each Disbursement this Period 796.02
City ARLINGTON State VA Zip Code 22207		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>7044.55</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WILLIAM BENJAMIN BRYANT</b>		<b>Transaction ID:</b> B21B053106-840
Mailing Address 1919 DINWIDDIE STREET		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City ARLINGTON	State VA	Zip Code 22207
Purpose of Disbursement Generic Salaries	Amount of Each Disbursement this Period 792.18	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ALEJANDRO BURGOS</b>		<b>Transaction ID:</b> B21B053106-841
Mailing Address 2130 SW 24TH ST.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City MIAMI	State FL	Zip Code 33145
Purpose of Disbursement Generic Travel	Amount of Each Disbursement this Period 53.81	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ALEJANDRO BURGOS</b>		<b>Transaction ID:</b> B21B053106-842
Mailing Address 2130 SW 24TH ST.		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
City MIAMI	State FL	Zip Code 33145
Purpose of Disbursement Generic Salaries	Amount of Each Disbursement this Period 1252.75	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2098.74</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ALEJANDRO BURGOS</b>		<b>Transaction ID: B21B053106-843</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2130 SW 24TH ST.		Amount of Each Disbursement this Period 1248.88
City MIAMI State FL Zip Code 33145	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-844</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 32.57
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-845</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 20.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1301.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2230 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-846 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 855.05
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-847 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 433.14
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-848 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 229.33
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1517.52
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-849 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 266.35
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-850 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 80.54
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-851 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 399.20
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	746.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-852</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period _____ .00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel Candidate Name _____ Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-853</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period _____ 136.46
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel Candidate Name _____ Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-854</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period _____ 30.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel Candidate Name _____ Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>166.46</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-855</b>	
Mailing Address 514 G ST. SE		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 17.00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-856</b>	
Mailing Address 514 G ST. SE		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1502.20
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-857</b>	
Mailing Address 514 G ST. SE		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 46.00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1565.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-858</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 442.60	
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-859</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 1146.50	
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-860</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 125.00	
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1714.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-861 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 304.76
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-862 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 237.83
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-863 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 639.60
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1182.19
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-864</b> Date of Disbursement 05 / 25 / 2006	
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 445.20	
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-865</b> Date of Disbursement 05 / 25 / 2006	
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 213.72	
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. ERIN E. CASEY</b>		<b>Transaction ID: B21B053106-866</b> Date of Disbursement 05 / 25 / 2006	
Mailing Address 514 G ST. SE		Amount of Each Disbursement this Period 158.59	
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Generic Travel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>817.51</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-867	
Mailing Address 514 G ST. SE		Date of Disbursement 05 / 25 / 2006	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 248.09
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ERIN E. CASEY</b>		<b>Transaction ID:</b> B21B053106-868	
Mailing Address 514 G ST. SE		Date of Disbursement 05 / 26 / 2006	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1498.35
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. PAUL V. CIARAMITARO</b>		<b>Transaction ID:</b> B21B053106-869	
Mailing Address 1689 35TH ST. NW APT 2		Date of Disbursement 05 / 12 / 2006	
City WASHINGTON	State DC	Zip Code 20007	Amount of Each Disbursement this Period 897.22
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2643.66</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PAUL V. CIARAMITARO</b>		<b>Transaction ID: B21B053106-870</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1689 35TH ST. NW APT 2		Amount of Each Disbursement this Period 893.37
City WASHINGTON State DC Zip Code 20007	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. JONATHAN A. COLLEGIO</b>		<b>Transaction ID: B21B053106-871</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 4390 LORCOM LANE #605		Amount of Each Disbursement this Period 1812.57
City ARLINGTON State VA Zip Code 22207	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. JONATHAN A. COLLEGIO</b>		<b>Transaction ID: B21B053106-872</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 4390 LORCOM LANE #605		Amount of Each Disbursement this Period 1808.70
City ARLINGTON State VA Zip Code 22207	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4514.64
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SARA A. CONAHAN</b>		<b>Transaction ID:</b> B21B053106-873
Mailing Address 2236 OBSERVATORY PLACE NW		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
City WASHINGTON	State DC	Zip Code 20007
Purpose of Disbursement Generic Salaries	Amount of Each Disbursement this Period 1291.97	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SARA A. CONAHAN</b>		<b>Transaction ID:</b> B21B053106-874
Mailing Address 2236 OBSERVATORY PLACE NW		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
City WASHINGTON	State DC	Zip Code 20007
Purpose of Disbursement Generic Salaries	Amount of Each Disbursement this Period 1288.11	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CARA P. CRONIN</b>		<b>Transaction ID:</b> B21B053106-875
Mailing Address 2727 29TH ST. NW #217		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
City WASHINGTON	State DC	Zip Code 20008
Purpose of Disbursement Generic Salaries	Amount of Each Disbursement this Period 798.87	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3378.95</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CARA P. CRONIN</b>		<b>Transaction ID: B21B053106-876</b>	
Mailing Address 2727 29TH ST. NW #217		Date of Disbursement 05 / 26 / 2006	
City WASHINGTON	State DC	Zip Code 20008	Amount of Each Disbursement this Period 795.00
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. TRENT T. EDWARDS</b>		<b>Transaction ID: B21B053106-877</b>	
Mailing Address 3945 ARBOLITO TRAIL		Date of Disbursement 05 / 12 / 2006	
City CHRISTIANSBURG	State VA	Zip Code 24073	Amount of Each Disbursement this Period 1301.56
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. TRENT T. EDWARDS</b>		<b>Transaction ID: B21B053106-878</b>	
Mailing Address 3945 ARBOLITO TRAIL		Date of Disbursement 05 / 26 / 2006	
City CHRISTIANSBURG	State VA	Zip Code 24073	Amount of Each Disbursement this Period 1297.69
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3394.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LYNDIA SUE EHLERS</b>		<b>Transaction ID: B21B053106-879</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 11101 GEORGIA AVE. APT. 510		Amount of Each Disbursement this Period 963.51
City WHEATON State MD Zip Code 20902	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LYNDIA SUE EHLERS</b>		<b>Transaction ID: B21B053106-880</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 11101 GEORGIA AVE. APT. 510		Amount of Each Disbursement this Period 959.64
City WHEATON State MD Zip Code 20902	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MAURA E. KUNZ</b>		<b>Transaction ID: B21B053106-881</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 4416 UNDERWOOD ST.		Amount of Each Disbursement this Period 1396.33
City UNIVERSITY PARK State MD Zip Code 20782	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**3319.48**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MAURA E. KUNZ</b>		Transaction ID: B21B053106-882 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 4416 UNDERWOOD ST.		Amount of Each Disbursement this Period 1386.48
City UNIVERSITY PARK State MD Zip Code 20782	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ANDREW ROBERT FASOLI</b>		Transaction ID: B21B053106-883 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2400 16TH ST. NW #211		Amount of Each Disbursement this Period 37.88
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ANDREW ROBERT FASOLI</b>		Transaction ID: B21B053106-884 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 2400 16TH ST. NW #211		Amount of Each Disbursement this Period 51.03
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1475.39
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ANDREW ROBERT FASOLI</b>		<b>Transaction ID: B21B053106-885</b> Date of Disbursement
Mailing Address 2400 16TH ST. NW #211		<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20009
Purpose of Disbursement Generic Salaries	<input type="text" value="1113.69"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANDREW ROBERT FASOLI</b>		<b>Transaction ID: B21B053106-886</b> Date of Disbursement
Mailing Address 2400 16TH ST. NW #211		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20009
Purpose of Disbursement Generic Travel	<input type="text" value="24.25"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANDREW ROBERT FASOLI</b>		<b>Transaction ID: B21B053106-887</b> Date of Disbursement
Mailing Address 2400 16TH ST. NW #211		<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20009
Purpose of Disbursement Generic Salaries	<input type="text" value="1113.67"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2251.61"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CARL M. FORTI</b>		<b>Transaction ID: B21B053106-888</b>	
Mailing Address 1106 EMERALD DRIVE		Date of Disbursement 05 / 04 / 2006	
City ALEXANDRIA	State VA	Zip Code 22308	Amount of Each Disbursement this Period 101.92
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CARL M. FORTI</b>		<b>Transaction ID: B21B053106-889</b>	
Mailing Address 1106 EMERALD DRIVE		Date of Disbursement 05 / 04 / 2006	
City ALEXANDRIA	State VA	Zip Code 22308	Amount of Each Disbursement this Period 34.00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CARL M. FORTI</b>		<b>Transaction ID: B21B053106-890</b>	
Mailing Address 1106 EMERALD DRIVE		Date of Disbursement 05 / 12 / 2006	
City ALEXANDRIA	State VA	Zip Code 22308	Amount of Each Disbursement this Period 3452.94
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3588.86</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CARL M. FORTI</b>		<b>Transaction ID:</b> B21B053106-891	
Mailing Address 1106 EMERALD DRIVE		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City ALEXANDRIA	State VA	Zip Code 22308	Amount of Each Disbursement this Period 230.85
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CARL M. FORTI</b>		<b>Transaction ID:</b> B21B053106-892	
Mailing Address 1106 EMERALD DRIVE		Date of Disbursement MM / DD / YYYY 05 / 25 / 2006	
City ALEXANDRIA	State VA	Zip Code 22308	Amount of Each Disbursement this Period 24.50
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CARL M. FORTI</b>		<b>Transaction ID:</b> B21B053106-893	
Mailing Address 1106 EMERALD DRIVE		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006	
City ALEXANDRIA	State VA	Zip Code 22308	Amount of Each Disbursement this Period 3443.07
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3698.42</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-894 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 15.29
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-895 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 10.00
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-896 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 8.67
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	33.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID: B21B053106-897</b>	
Mailing Address 1600 S. EADS ST. #228N		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period  26.51
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID: B21B053106-898</b>	
Mailing Address 1600 S. EADS ST. #228N		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period  16.70
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ADAM P. FROMM</b>		<b>Transaction ID: B21B053106-899</b>	
Mailing Address 1600 S. EADS ST. #228N		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period  36.00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>79.21</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-900	
Mailing Address 1600 S. EADS ST. #228N		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period  .00
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-901	
Mailing Address 1600 S. EADS ST. #228N		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period  39.44
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-902	
Mailing Address 1600 S. EADS ST. #228N		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period  408.18
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>447.62</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-903
Mailing Address 1600 S. EADS ST. #228N		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement Generic Travel	Amount of Each Disbursement this Period 591.17	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-904
Mailing Address 1600 S. EADS ST. #228N		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement Generic Travel	Amount of Each Disbursement this Period 681.69	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-905
Mailing Address 1600 S. EADS ST. #228N		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement Generic Travel	Amount of Each Disbursement this Period 175.78	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1448.64

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-906 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 106.52
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-907 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 1253.37
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-908 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 540.71
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1900.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID: B21B053106-909</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 673.19
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID: B21B053106-910</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 32.97
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADAM P. FROMM</b>		<b>Transaction ID: B21B053106-911</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 482.12
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1188.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-912 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 1235.01
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-913 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 336.02
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-914 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 212.90
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1783.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-915 Date of Disbursement
Mailing Address 1600 S. EADS ST. #228N		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement Generic Travel	<input type="text" value="32.48"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-916 Date of Disbursement
Mailing Address 1600 S. EADS ST. #228N		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement Generic Travel	<input type="text" value="378.60"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-917 Date of Disbursement
Mailing Address 1600 S. EADS ST. #228N		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement Generic Travel	<input type="text" value="755.04"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1166.12"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID: B21B053106-918</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 478.04
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID: B21B053106-919</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 66.95
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADAM P. FROMM</b>		<b>Transaction ID: B21B053106-920</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 70.32
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	615.31
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-921 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 900.33
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADAM P. FROMM</b>		<b>Transaction ID:</b> B21B053106-922 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1600 S. EADS ST. #228N		Amount of Each Disbursement this Period 896.46
City ARLINGTON State VA Zip Code 22202		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-923 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 254.60
City RICHMOND State VA Zip Code 23230		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2051.39
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2256 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-924 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 1441.55
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-925 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 666.73
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-926 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 133.40
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2241.68
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2257 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-927 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 139.84
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-928 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period .00
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-929 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 476.00
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	615.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-930 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period .00
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-931 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 235.20
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. TIMOTHY M. GARON</b>		<b>Transaction ID:</b> B21B053106-932 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 49.47
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	284.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TIMOTHY M. GARON</b>		<b>Transaction ID: B21B053106-933</b>	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period 1720.57
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY M. GARON</b>		<b>Transaction ID: B21B053106-934</b>	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period 704.93
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. TIMOTHY M. GARON</b>		<b>Transaction ID: B21B053106-935</b>	
Mailing Address 4202 AUGUSTA AVE.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2006	
City RICHMOND	State VA	Zip Code 23230	Amount of Each Disbursement this Period 4416.55
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6842.05</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TIMOTHY M. GARON</b>		<b>Transaction ID: B21B053106-936</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 1322.37
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY M. GARON</b>		<b>Transaction ID: B21B053106-937</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 548.35
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. TIMOTHY M. GARON</b>		<b>Transaction ID: B21B053106-938</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 4202 AUGUSTA AVE.		Amount of Each Disbursement this Period 1716.71
City RICHMOND State VA Zip Code 23230	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3587.43</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. GIUSEPPE NESPOLI</b>		<b>Transaction ID: B21B053106-939</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 525 25TH STREET		Amount of Each Disbursement this Period 11.20
City ARLINGTON State VA Zip Code 22202	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GIUSEPPE NESPOLI</b>		<b>Transaction ID: B21B053106-940</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 525 25TH STREET		Amount of Each Disbursement this Period 1049.88
City ARLINGTON State VA Zip Code 22202	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GIUSEPPE NESPOLI</b>		<b>Transaction ID: B21B053106-941</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 525 25TH STREET		Amount of Each Disbursement this Period 1046.02
City ARLINGTON State VA Zip Code 22202	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2107.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KELLY O. GOSSELIN</b>		<b>Transaction ID:</b> B21B053106-942 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 9917 OLD GEORGETOWN RD		Amount of Each Disbursement this Period 1619.93
City BETHESDA State MD Zip Code 20814	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. KELLY O. GOSSELIN</b>		<b>Transaction ID:</b> B21B053106-943 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 9917 OLD GEORGETOWN RD		Amount of Each Disbursement this Period 1610.08
City BETHESDA State MD Zip Code 20814	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MYRA T. GRAVOIS</b>		<b>Transaction ID:</b> B21B053106-944 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 9387 MOUNT VERNON CIRCLE		Amount of Each Disbursement this Period 24.00
City ALEXANDRIA State VA Zip Code 22309	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3254.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MYRA T. GRAVOIS</b>		<b>Transaction ID: B21B053106-945</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 9387 MOUNT VERNON CIRCLE		Amount of Each Disbursement this Period 29.35
City ALEXANDRIA State VA Zip Code 22309	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MYRA T. GRAVOIS</b>		<b>Transaction ID: B21B053106-946</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 9387 MOUNT VERNON CIRCLE		Amount of Each Disbursement this Period 19.14
City ALEXANDRIA State VA Zip Code 22309	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MYRA T. GRAVOIS</b>		<b>Transaction ID: B21B053106-947</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 9387 MOUNT VERNON CIRCLE		Amount of Each Disbursement this Period 25.10
City ALEXANDRIA State VA Zip Code 22309	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	73.59
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MYRA T. GRAVOIS</b>		<b>Transaction ID: B21B053106-948</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 9387 MOUNT VERNON CIRCLE		Amount of Each Disbursement this Period 1306.17
City ALEXANDRIA State VA Zip Code 22309	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MYRA T. GRAVOIS</b>		<b>Transaction ID: B21B053106-949</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 9387 MOUNT VERNON CIRCLE		Amount of Each Disbursement this Period 1302.29
City ALEXANDRIA State VA Zip Code 22309	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. GEORGE G. GRIFFIN</b>		<b>Transaction ID: B21B053106-950</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 7596 LINDBERG DRIVE		Amount of Each Disbursement this Period 2257.50
City ALEXANDRIA State VA Zip Code 22306	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4865.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. GEORGE G. GRIFFIN</b>		<b>Transaction ID: B21B053106-951</b>	
Mailing Address 7596 LINDBERG DRIVE		Date of Disbursement MM / DD / YYYY 05 / 26 / 2006	
City ALEXANDRIA	State VA	Zip Code 22306	Amount of Each Disbursement this Period 2247.61
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER M. HANKS</b>		<b>Transaction ID: B21B053106-952</b>	
Mailing Address 2629 COLUMBUS ST.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 756.60
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER M. HANKS</b>		<b>Transaction ID: B21B053106-953</b>	
Mailing Address 2629 COLUMBUS ST.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 742.20
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3746.41</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER M. HANKS</b>		<b>Transaction ID: B21B053106-954</b>	
Mailing Address 2629 COLUMBUS ST.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 215.20
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER M. HANKS</b>		<b>Transaction ID: B21B053106-955</b>	
Mailing Address 2629 COLUMBUS ST.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 240.09
Purpose of Disbursement Generic Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER M. HANKS</b>		<b>Transaction ID: B21B053106-956</b>	
Mailing Address 2629 COLUMBUS ST.		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 1188.63
Purpose of Disbursement Generic Salaries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1643.92</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER M. HANKS</b>		<b>Transaction ID: B21B053106-957</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2629 COLUMBUS ST.		Amount of Each Disbursement this Period 1184.76
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-958</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 364.94
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-959</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 751.52
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2301.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-960</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 318.13
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-961</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 10.92
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-962</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 49.53
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	378.58
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-963</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 409.20
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-964</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 39.21
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-965</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 66.36
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	514.77
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-966</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 64.88
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-967</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 56.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-968</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 659.11
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	779.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2271 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JEFFREY J. HERINCKX</b>		<b>Transaction ID: B21B053106-969</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 428 3RD ST. NE APT. #301		Amount of Each Disbursement this Period 655.24
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. MARK L. JOHNSON</b>		<b>Transaction ID: B21B053106-970</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 13583 LINDAMERE LANE		Amount of Each Disbursement this Period 969.75
City SAN DIEGO State CA Zip Code 92128	Purpose of Disbursement Generic Data Processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. MARK L. JOHNSON</b>		<b>Transaction ID: B21B053106-971</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 13583 LINDAMERE LANE		Amount of Each Disbursement this Period 53.86
City SAN DIEGO State CA Zip Code 92128	Purpose of Disbursement Generic Data Processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1678.85
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TODD R. JOHNSON</b>		<b>Transaction ID:</b> B21B053106-972 Date of Disbursement
Mailing Address 5909 COVERDALE WAY APT. H		<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22310
Purpose of Disbursement Generic Salaries	<input type="text" value="1236.11"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TODD R. JOHNSON</b>		<b>Transaction ID:</b> B21B053106-973 Date of Disbursement
Mailing Address 5909 COVERDALE WAY APT. H		<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ALEXANDRIA	State VA	Zip Code 22310
Purpose of Disbursement Generic Salaries	<input type="text" value="1232.24"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. OLIVIA N. KELLEY</b>		<b>Transaction ID:</b> B21B053106-974 Date of Disbursement
Mailing Address 5599 SEMINARY ROAD APT. 2017S		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City FALLS CHURCH	State VA	Zip Code 22041
Purpose of Disbursement Generic Travel	<input type="text" value=".00"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2468.35"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-975</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 1192.80
City FALLS CHURCH State VA Zip Code 22041		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-976</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 617.22
City FALLS CHURCH State VA Zip Code 22041		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-977</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 394.23
City FALLS CHURCH State VA Zip Code 22041		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2204.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-978</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period _____ .00
City FALLS CHURCH State VA Zip Code 22041		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-979</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period _____ 1204.39
City FALLS CHURCH State VA Zip Code 22041		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-980</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period _____ 200.25
City FALLS CHURCH State VA Zip Code 22041		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1404.64</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-981</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 396.26
City FALLS CHURCH State VA Zip Code 22041		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-982</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 27.00
City FALLS CHURCH State VA Zip Code 22041		
Purpose of Disbursement Generic Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-983</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 1070.26
City FALLS CHURCH State VA Zip Code 22041		
Purpose of Disbursement Generic Salaries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1493.52
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2276 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-984</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 1155.10
City FALLS CHURCH State VA Zip Code 22041	Purpose of Disbursement Generic Travel	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-985</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 116.08
City FALLS CHURCH State VA Zip Code 22041	Purpose of Disbursement Generic Travel	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-986</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 301.63
City FALLS CHURCH State VA Zip Code 22041	Purpose of Disbursement Generic Travel	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1572.81
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2277 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. OLIVIA N. KELLEY</b>		<b>Transaction ID: B21B053106-987</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 5599 SEMINARY ROAD APT. 2017S		Amount of Each Disbursement this Period 1066.38
City FALLS CHURCH State VA Zip Code 22041	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. MARY SARAH KINNER</b>		<b>Transaction ID: B21B053106-988</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 6506 POTOMAC AVE. #B2		Amount of Each Disbursement this Period 909.68
City ALEXANDRIA State VA Zip Code 22307	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. MARY SARAH KINNER</b>		<b>Transaction ID: B21B053106-989</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 6506 POTOMAC AVE. #B2		Amount of Each Disbursement this Period 905.81
City ALEXANDRIA State VA Zip Code 22307	Purpose of Disbursement Generic Salaries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2881.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2278 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PATRICK D. KRASON</b>		Transaction ID: B21B053106-990 Date of Disbursement																				
Mailing Address 5800 QUANTRELL AVE. APT. #210		<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>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	2		2	0	0	6													
City ALEXANDRIA	State VA	Zip Code 22312																				
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <table border="1"><tr><td>1095.34</td></tr></table>	1095.34																			
1095.34																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>B. PATRICK D. KRASON</b>		Transaction ID: B21B053106-991 Date of Disbursement																				
Mailing Address 5800 QUANTRELL AVE. APT. #210		<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>5</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		2	6		2	0	0	6													
City ALEXANDRIA	State VA	Zip Code 22312																				
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <table border="1"><tr><td>1085.49</td></tr></table>	1085.49																			
1085.49																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) <b>C. HENRY KURUSZ</b>		Transaction ID: B21B053106-992 Date of Disbursement																				
Mailing Address 215 C STREET SE #312		<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>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	2		2	0	0	6													
City ALEXANDRIA	State VA	Zip Code 22302																				
Purpose of Disbursement Generic Salaries		Amount of Each Disbursement this Period <table border="1"><tr><td>785.02</td></tr></table>	785.02																			
785.02																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2965.85</td></tr></table>	2965.85
2965.85		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2279 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. HENRY KURUSZ</b>		<b>Transaction ID: B21B053106-993</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 215 C STREET SE #312		Amount of Each Disbursement this Period 781.15
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement Generic Salaries	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. PATRICK R. LEOPOLD</b>		<b>Transaction ID: B21B053106-994</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3 IRISH CT.		Amount of Each Disbursement this Period 445.59
City GAITHERSBURG State MD Zip Code 20878	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. PATRICK R. LEOPOLD</b>		<b>Transaction ID: B21B053106-995</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3 IRISH CT.		Amount of Each Disbursement this Period 178.08
City GAITHERSBURG State MD Zip Code 20878	Purpose of Disbursement Generic Travel	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1404.82
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2280 / 2352

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PATRICK R. LEOPOLD</b>		<b>Transaction ID: B21B053106-996</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3 IRISH CT.		Amount of Each Disbursement this Period 114.38
City GAITHERSBURG	State MD	
Zip Code 20878		Category/ Type
Purpose of Disbursement Generic Travel		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PATRICK R. LEOPOLD</b>		<b>Transaction ID: B21B053106-997</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3 IRISH CT.		Amount of Each Disbursement this Period 103.10
City GAITHERSBURG	State MD	
Zip Code 20878		Category/ Type
Purpose of Disbursement Generic Travel		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PATRICK R. LEOPOLD</b>		<b>Transaction ID: B21B053106-998</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3 IRISH CT.		Amount of Each Disbursement this Period 182.77
City GAITHERSBURG	State MD	
Zip Code 20878		Category/ Type
Purpose of Disbursement Generic Travel		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2281 / 2352

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. PATRICK R. LEOPOLD**

Transaction ID: B21B053106-999  
Date of Disbursement

Mailing Address 3 IRISH CT.

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

City State Zip Code  
GAITHERSBURG MD 20878

Amount of Each Disbursement this Period

1148.73
---------

Purpose of Disbursement  
Generic Salaries

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

1148.73
---------

TOTAL This Period (last page this line number only) ..... ►

3667044.97
------------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2282 / 2352

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. THE 2006 PRESIDENT'S DINNER**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B22053106-1232

Date of Disbursement

05 / 04 / 2006

Amount of Each Disbursement this Period

50000.00

**B. THE 2006 PRESIDENT'S DINNER**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B22053106-1233

Date of Disbursement

05 / 16 / 2006

Amount of Each Disbursement this Period

50000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

100000.00

**TOTAL** This Period (last page this line number only) .....

100000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2283 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
GEOFF DAVIS FOR CONGRESS

Mailing Address 3161 DIXIE HWY STE F

City ERLANGER State KY Zip Code 41018

Purpose of Disbursement  
Direct Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: KY District: 4

Transaction ID: B23053106-1234

Date of Disbursement

05 / 16 / 2006

Amount of Each Disbursement this Period

2815.10

**B.** Full Name (Last, First, Middle Initial)  
JIM GERLACH FOR CONGRESS

Mailing Address PO BOX 87

City UWCHLAND State PA Zip Code 19480

Purpose of Disbursement  
Direct Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: PA District: 6

Transaction ID: B23053106-1235

Date of Disbursement

05 / 16 / 2006

Amount of Each Disbursement this Period

3726.00

**C.** Full Name (Last, First, Middle Initial)  
RODNEY ALEXANDER FOR CONGRESS

Mailing Address PO BOX 367

City QUITMAN State LA Zip Code 71268

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: LA District: 5

Transaction ID: B23M053106-1236

Date of Disbursement

05 / 05 / 2006

Amount of Each Disbursement this Period

98.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

6639.10

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2284 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
RODNEY ALEXANDER FOR CONGRESS

Mailing Address PO BOX 367

City QUITMAN State LA Zip Code 71268

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: LA District: 5

Transaction ID: B23M053106-1237

Date of Disbursement

05 / 08 / 2006

Amount of Each Disbursement this Period

98.00

B. Full Name (Last, First, Middle Initial)  
RODNEY ALEXANDER FOR CONGRESS

Mailing Address PO BOX 367

City QUITMAN State LA Zip Code 71268

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: LA District: 5

Transaction ID: B23M053106-1238

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

98.00

C. Full Name (Last, First, Middle Initial)  
RODNEY ALEXANDER FOR CONGRESS

Mailing Address PO BOX 367

City QUITMAN State LA Zip Code 71268

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: LA District: 5

Transaction ID: B23M053106-1239

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

98.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

294.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BARRETT FOR CONGRESS</b>		Transaction ID: B23M053106-1240 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address PO BOX 869		Amount of Each Disbursement this Period 98.00
City WESTMINSTER State SC Zip Code 29693	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. BARRETT FOR CONGRESS</b>		Transaction ID: B23M053106-1241 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address PO BOX 869		Amount of Each Disbursement this Period 98.00
City WESTMINSTER State SC Zip Code 29693	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. BARRETT FOR CONGRESS</b>		Transaction ID: B23M053106-1242 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address PO BOX 869		Amount of Each Disbursement this Period 98.00
City WESTMINSTER State SC Zip Code 29693	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	294.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BARRETT FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1243 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address PO BOX 869		Amount of Each Disbursement this Period 98.00
City WESTMINSTER State SC Zip Code 29693	Purpose of Disbursement BLAST AFX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. ROB BISHOP FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1244 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address PO BOX 2002		Amount of Each Disbursement this Period 98.00
City BRIGHAM CITY State UT Zip Code 84302	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 1	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. DAN BURTON FOR CONGRESS COMM.</b>		<b>Transaction ID:</b> B23M053106-1245 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address CURT COONROD TREASURER P.O. BOX 50593		Amount of Each Disbursement this Period 98.00
City INDIANAPOLIS State IN Zip Code 46250	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 5	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	294.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	98.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
HOOSIERS FOR BUYER FOR CONG.

Mailing Address DOUG RADERSTORF TREASURER  
P.O. BOX 712

City MONTICELLO State IN Zip Code 47960

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: IN District: 4

Transaction ID: B23M053106-1246  
Date of Disbursement

05 / 24 / 2006

Amount of Each Disbursement this Period

312.50

**B.** Full Name (Last, First, Middle Initial)  
CAMPBELL FOR CONGRESS

Mailing Address 18004 SKY PARK CIRCLE STE 155

City IRVINE State CA Zip Code 92660

Purpose of Disbursement  
BLAST FAX - House Candidate  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: CA District: 48

Transaction ID: B23M053106-1247  
Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

98.00

**C.** Full Name (Last, First, Middle Initial)  
CAMPBELL FOR CONGRESS

Mailing Address 18004 SKY PARK CIRCLE STE 155

City IRVINE State CA Zip Code 92660

Purpose of Disbursement  
BLAST FAX - House Candidate  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼  
State: CA District: 48

Transaction ID: B23M053106-1248  
Date of Disbursement

05 / 15 / 2006

Amount of Each Disbursement this Period

98.00

**SUBTOTAL** of Disbursements This Page (optional) .....

508.50

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
ERIC CANTOR FOR CONGRESS

Mailing Address P.O. BOX 17813

City RICHMOND State VA Zip Code 23226

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: VA District: 7

Transaction ID: B23M053106-1249

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

98.00

**B.** Full Name (Last, First, Middle Initial)  
ERIC CANTOR FOR CONGRESS

Mailing Address P.O. BOX 17813

City RICHMOND State VA Zip Code 23226

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: VA District: 7

Transaction ID: B23M053106-1250

Date of Disbursement

05 / 12 / 2006

Amount of Each Disbursement this Period

98.00

**C.** Full Name (Last, First, Middle Initial)  
ERIC CANTOR FOR CONGRESS

Mailing Address P.O. BOX 17813

City RICHMOND State VA Zip Code 23226

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: VA District: 7

Transaction ID: B23M053106-1251

Date of Disbursement

05 / 15 / 2006

Amount of Each Disbursement this Period

98.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

294.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
ERIC CANTOR FOR CONGRESS

Mailing Address P.O. BOX 17813

City RICHMOND State VA Zip Code 23226

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: VA District: 7

Transaction ID: B23M053106-1252

Date of Disbursement

05 / 23 / 2006

Amount of Each Disbursement this Period

98.00

B. Full Name (Last, First, Middle Initial)  
ERIC CANTOR FOR CONGRESS

Mailing Address P.O. BOX 17813

City RICHMOND State VA Zip Code 23226

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: VA District: 7

Transaction ID: B23M053106-1253

Date of Disbursement

05 / 24 / 2006

Amount of Each Disbursement this Period

98.00

C. Full Name (Last, First, Middle Initial)  
SHELLEY MOORE CAPITO

Mailing Address FOR CONGRESS  
P.O. BOX 11519

City CHARLESTON State WV Zip Code 25339

Purpose of Disbursement  
SATELITTE SERVICES - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: WV District: 2

Transaction ID: B23M053106-1254

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

325.00

SUBTOTAL of Disbursements This Page (optional) ▶

521.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SHELLEY MOORE CAPITO</b>		<b>Transaction ID: B23M053106-1255</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address FOR CONGRESS P.O. BOX 11519		Amount of Each Disbursement this Period 325.00
City CHARLESTON State WV Zip Code 25339		
Purpose of Disbursement SATELLITE SERVICES - House Candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 2		

Full Name (Last, First, Middle Initial) <b>B. SHELLEY MOORE CAPITO</b>		<b>Transaction ID: B23M053106-1256</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address FOR CONGRESS P.O. BOX 11519		Amount of Each Disbursement this Period 250.00
City CHARLESTON State WV Zip Code 25339		
Purpose of Disbursement SATELLITE SERVICES - House Candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 2		

Full Name (Last, First, Middle Initial) <b>C. MIKE CASTLE FOR CONGRESS</b>		<b>Transaction ID: B23M053106-1257</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address CARL HOSTETTER TREASURER PO BOX 133		Amount of Each Disbursement this Period 98.00
City WILMINGTON State DE Zip Code 19899		
Purpose of Disbursement BLAST FAX - House Candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: DE District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	673.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2291 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MIKE CASTLE FOR CONGRESS</b>		<b>Transaction ID: B23M053106-1258</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address CARL HOSTETTER TREASURER PO BOX 133		Amount of Each Disbursement this Period 312.50
City WILMINGTON	State DE	
Zip Code 19899		Category/ Type
Purpose of Disbursement SATELLITE SERVICES - House Candidate		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: DE District:		

Full Name (Last, First, Middle Initial) <b>B. CHOCOLA FOR CONGRESS</b>		<b>Transaction ID: B23M053106-1259</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address P.O. BOX 6728		Amount of Each Disbursement this Period 19.60
City SOUTH BEND	State IN	
Zip Code 46660		Category/ Type
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 2		

Full Name (Last, First, Middle Initial) <b>C. CHOCOLA FOR CONGRESS</b>		<b>Transaction ID: B23M053106-1260</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address P.O. BOX 6728		Amount of Each Disbursement this Period 98.00
City SOUTH BEND	State IN	
Zip Code 46660		Category/ Type
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 2		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	430.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2292 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
CONAWAY FOR CONGRESS

Mailing Address PO BOX 51272

City MIDLAND State TX Zip Code 79710

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: TX District: 11

Transaction ID: B23M053106-1261

Date of Disbursement

05 / 19 / 2006

Amount of Each Disbursement this Period

98.00

B. Full Name (Last, First, Middle Initial)  
GEOFF DAVIS FOR CONGRESS

Mailing Address 3161 DIXIE HWY STE F

City ERLANGER State KY Zip Code 41018

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: KY District: 4

Transaction ID: B23M053106-1262

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

98.00

C. Full Name (Last, First, Middle Initial)  
TOM DAVIS FOR CONGRESS

Mailing Address P.O. BOX 483

City DUNN LORING State VA Zip Code 22027

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: VA District: 11

Transaction ID: B23M053106-1263

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

98.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

294.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2293 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. MARIO DIAZ-BALART FOR CONGRESS**

Mailing Address 8770 SUNSET DR #422

City State Zip Code  
MIAMI FL 33173

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: FL District: 25

Transaction ID: B23M053106-1264

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

98.00

Full Name (Last, First, Middle Initial)  
**B. MARIO DIAZ-BALART FOR CONGRESS**

Mailing Address 8770 SUNSET DR #422

City State Zip Code  
MIAMI FL 33173

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: FL District: 25

Transaction ID: B23M053106-1265

Date of Disbursement

05 / 26 / 2006

Amount of Each Disbursement this Period

98.00

Full Name (Last, First, Middle Initial)  
**C. DIAZ-BALART FOR CONGRESS**

Mailing Address 8770 SUNSET DRIVE #421

City State Zip Code  
MIAMI FL 33173

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: FL District: 21

Transaction ID: B23M053106-1266

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

237.50

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

433.50

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DIAZ-BALART FOR CONGRESS</b>		<b>Transaction ID: B23M053106-1267</b>	
Mailing Address 8770 SUNSET DRIVE #421		Date of Disbursement 05 / 18 / 2006	
City MIAMI	State FL	Zip Code 33173	Amount of Each Disbursement this Period 316.66
Purpose of Disbursement SATELLITE SERVICES - House Candidate		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: FL	District: 21		

Full Name (Last, First, Middle Initial) <b>B. DREIER FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: B23M053106-1268</b>	
Mailing Address JACK COUCH TREASURER P.O. BOX 1110		Date of Disbursement 05 / 25 / 2006	
City COVINA	State CA	Zip Code 91722	Amount of Each Disbursement this Period 98.00
Purpose of Disbursement BLAST FAX - House Candidate		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA	District: 26		

Full Name (Last, First, Middle Initial) <b>C. TEAM EMERSON</b>		<b>Transaction ID: B23M053106-1269</b>	
Mailing Address DAVID LIMBAUGH TREASURER P.O. BOX 822		Date of Disbursement 05 / 05 / 2006	
City CAPE GIRARDEAU	State MO	Zip Code 63702	Amount of Each Disbursement this Period 98.00
Purpose of Disbursement BLAST FAX - House Candidate		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MO	District: 8		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>512.66</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. PEOPLE FOR ENGLISH COMMITTEE**

Mailing Address PO BOX 1940

City ERIE State PA Zip Code 16507

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 3  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: B23M053106-1270  
Date of Disbursement

05 / 09 / 2006

Amount of Each Disbursement this Period

316.66

Full Name (Last, First, Middle Initial)  
**B. PEOPLE FOR ENGLISH COMMITTEE**

Mailing Address PO BOX 1940

City ERIE State PA Zip Code 16507

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 3  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: B23M053106-1271  
Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

316.66

Full Name (Last, First, Middle Initial)  
**C. FLAKE FOR CONGRESS**

Mailing Address P.O. BOX 21447

City MESA State AZ Zip Code 85277

Purpose of Disbursement  
BLAST FAX - House Candidate  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AZ District: 6  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: B23M053106-1272  
Date of Disbursement

05 / 09 / 2006

Amount of Each Disbursement this Period

98.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

731.32

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. FRIENDS OF MARK FOLEY FOR CONG**

Mailing Address DONNA WINTERSON TREASURER  
P.O. BOX 30505

City PALM BEACH GARD State FL Zip Code 33420

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: FL District: 16

Transaction ID: B23M053106-1273

Date of Disbursement

05 / 12 / 2006

Amount of Each Disbursement this Period

19.60

Full Name (Last, First, Middle Initial)  
**B. VITO FOSSELLA FOR CONGRESS**

Mailing Address ANTHONY MALTESE TREASURER  
P.O. BOX 060248

City STATEN ISLAND State NY Zip Code 10306

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Transaction ID: B23M053106-1274

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

98.00

Full Name (Last, First, Middle Initial)  
**C. VIRGINIA FOXX FOR CONGRESS**

Mailing Address 11468 HWY 105

City BANNER ELK State NC Zip Code 28604

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NC District: 5

Transaction ID: B23M053106-1275

Date of Disbursement

05 / 09 / 2006

Amount of Each Disbursement this Period

316.66

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

434.26

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2297 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. VIRGINIA FOXX FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 11468 HWY 105

City BANNER ELK State NC Zip Code 28604

Purpose of Disbursement  
STELLITE SERVICES - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NC District: 5

Transaction ID: B23M053106-1276

Date of Disbursement

05 / 24 / 2006

Amount of Each Disbursement this Period

80.00

B. JIM GERLACH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 87

City UWCHLAND State PA Zip Code 19480

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: PA District: 6

Transaction ID: B23M053106-1277

Date of Disbursement

05 / 18 / 2006

Amount of Each Disbursement this Period

98.00

C. HALL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 711

City ROCKWELL State TX Zip Code 75087

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: TX District: 4

Transaction ID: B23M053106-1278

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

98.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶

276.00

TOTAL This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ROBIN HAYES FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1279 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address P.O. BOX 2000		Amount of Each Disbursement this Period 98.00
City CONCORD State NC Zip Code 28026	Category/ Type	
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ROBIN HAYES FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1280 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address P.O. BOX 2000		Amount of Each Disbursement this Period 80.00
City CONCORD State NC Zip Code 28026	Category/ Type	
Purpose of Disbursement SATELLITE SERVICES - House Candidate		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 8	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. INGLIS FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> B23M053106-1281 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address JEFF PARKER TREASURER P.O. BOX 361		Amount of Each Disbursement this Period 98.00
City GREENVILLE State SC Zip Code 29602	Category/ Type	
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	276.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. INGLIS FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> B23M053106-1282
Mailing Address JEFF PARKER TREASURER P.O. BOX 361		Date of Disbursement MM / DD / YYYY 05 / 23 / 2006
City GREENVILLE	State SC	Amount of Each Disbursement this Period  98.00
Zip Code 29602		
Purpose of Disbursement BLAST FAX - House Candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC	District: 4	

Full Name (Last, First, Middle Initial) <b>B. COMMITTEE TO RE-ELECT BOBBY JINDAL</b>		<b>Transaction ID:</b> B23M053106-1283
Mailing Address PO BOX 8628		Date of Disbursement MM / DD / YYYY 05 / 23 / 2006
City METAIRIE	State LA	Amount of Each Disbursement this Period  98.00
Zip Code 70011		
Purpose of Disbursement BLAST FAX - House Candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: LA	District: 1	

Full Name (Last, First, Middle Initial) <b>C. NANCY JOHNSON FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1284
Mailing Address JOHN EVELETH TREASURER P.O. BOX 1986		Date of Disbursement MM / DD / YYYY 05 / 12 / 2006
City NEW BRITAIN	State CT	Amount of Each Disbursement this Period  19.60
Zip Code 06050		
Purpose of Disbursement BLAST FAX - House Candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT	District: 5	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>215.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2300 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PORTER FOR CONGRESS</b>		Transaction ID: B23M053106-1285 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 7530 W. SAHARA AVE. SUITE 101		Amount of Each Disbursement this Period 98.00
City LAS VEGAS State NV Zip Code 89117	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 3		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. PORTER FOR CONGRESS</b>		Transaction ID: B23M053106-1286 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 7530 W. SAHARA AVE. SUITE 101		Amount of Each Disbursement this Period 98.00
City LAS VEGAS State NV Zip Code 89117	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 3		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. PETE KING FOR CONGRESS COMM.</b>		Transaction ID: B23M053106-1287 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address GENE TURNER TREASURER P.O. BOX 1428		Amount of Each Disbursement this Period 98.00
City SEAFORD State NY Zip Code 11783	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 3		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	294.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2301 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PETE KING FOR CONGRESS COMM.</b>		<b>Transaction ID:</b> B23M053106-1288 Date of Disbursement
Mailing Address GENE TURNER TREASURER P.O. BOX 1428		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City SEAFORD	State NY	Zip Code 11783
Purpose of Disbursement BLAST FAX - House Candidate		Amount of Each Disbursement this Period <input type="text" value="98.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 3	

Full Name (Last, First, Middle Initial) <b>B. KING FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1289 Date of Disbursement
Mailing Address PO BOX 576		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2006"/>
City ODEBOLT	State IA	Zip Code 51458
Purpose of Disbursement SATELLITE SERVICES - House Candidate		Amount of Each Disbursement this Period <input type="text" value="316.66"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 5	

Full Name (Last, First, Middle Initial) <b>C. KING FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1290 Date of Disbursement
Mailing Address PO BOX 576		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City ODEBOLT	State IA	Zip Code 51458
Purpose of Disbursement SATELLITE SERVICES - House Candidate		Amount of Each Disbursement this Period <input type="text" value="50.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 5	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="464.66"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. MARK KIRK FOR CONGRESS**

Mailing Address 28 GREENBAY RD.

City WINNETKA State IL Zip Code 60093

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: IL District: 10

Transaction ID: B23M053106-1291  
Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

98.00

Full Name (Last, First, Middle Initial)  
**B. KNOLLENBERG FOR CONGRESS**

Mailing Address ROBERT HALLMARK TREASURER  
27877 ORCHARD LAKE ROAD

City FARMINGTON HILL State MI Zip Code 48334

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: MI District: 9

Transaction ID: B23M053106-1292  
Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

98.00

Full Name (Last, First, Middle Initial)  
**C. FRIENDS OF RAY LAHOOD**

Mailing Address 4238 N Knoxville Ave

City Peoria State IL Zip Code 61614

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: IL District: 18

Transaction ID: B23M053106-1293  
Date of Disbursement

05 / 31 / 2006

Amount of Each Disbursement this Period

98.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

294.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
RON LEWIS FOR CONGRESS

Mailing Address KEITH JOHNSON TREASURER  
P.O. BOX 307

City ELIZABETHTOWN State KY Zip Code 42702

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: KY District: 2

Transaction ID: B23M053106-1294

Date of Disbursement

05 / 03 / 2006

Amount of Each Disbursement this Period

98.00

**B.** Full Name (Last, First, Middle Initial)  
LINDER FOR CONGRESS COMMITTEE

Mailing Address LYNNE LINDER TREASURER  
P.O. BOX 942060

City ATLANTA State GA Zip Code 31141

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: GA District: 7

Transaction ID: B23M053106-1295

Date of Disbursement

05 / 05 / 2006

Amount of Each Disbursement this Period

98.00

**C.** Full Name (Last, First, Middle Initial)  
FRANK LUCAS FOR CONGRESS

Mailing Address SUSAN BALKENBUSH TREASURER  
P.O. BOX 26825

City OKLAHOMA CITY State OK Zip Code 73126

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: OK District: 3

Transaction ID: B23M053106-1296

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

325.00

**SUBTOTAL** of Disbursements This Page (optional) .....

521.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
FRANK LUCAS FOR CONGRESS

Mailing Address SUSAN BALKENBUSH TREASURER  
P.O. BOX 26825

City OKLAHOMA CITY State OK Zip Code 73126

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: OK District: 3

Transaction ID: B23M053106-1297

Date of Disbursement

/

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
MCHENRY FOR CONGRESS

Mailing Address PO BOX 1406

City HICKORY State NC Zip Code 28601

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NC District: 10

Transaction ID: B23M053106-1298

Date of Disbursement

/

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
CATHY MCMORRIS FOR CONGRESS

Mailing Address PO BOX 137

City SPOKANE State WA Zip Code 99210

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: WA District: 5

Transaction ID: B23M053106-1299

Date of Disbursement

/

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2305 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MICA FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1300 Date of Disbursement
Mailing Address JAMES GATELY TREASURER P.O. BOX 181546		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="12"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City CASSELBERRY	State FL	Zip Code 32718
Purpose of Disbursement BLAST FAX - House Candidate		Amount of Each Disbursement this Period <input type="text" value="98.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 7		

Full Name (Last, First, Middle Initial) <b>B. JERRY MORAN FOR CONGRESS COMM</b>		<b>Transaction ID:</b> B23M053106-1301 Date of Disbursement
Mailing Address THOMAS DECHANT TREASURER 2758 THUNDERBIRD DRIVE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="18"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City HAYS	State KS	Zip Code 67601
Purpose of Disbursement SATELLITE SERVICES - House Candidate		Amount of Each Disbursement this Period <input type="text" value="316.66"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS District: 1		

Full Name (Last, First, Middle Initial) <b>C. TIM MURPHY FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1302 Date of Disbursement
Mailing Address PO BOX 11721		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City PITTSBURGH	State PA	Zip Code 15228
Purpose of Disbursement BLAST FAX - House Candidate		Amount of Each Disbursement this Period <input type="text" value="98.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 18		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="512.66"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2306 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
MUSGRAVE FOR CONGRESS

Mailing Address 118 CHARLOTTE ST

City JOHNSTOWN State CO Zip Code 80534

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: CO District: 4

Transaction ID: B23M053106-1303

Date of Disbursement

05 / 10 / 2006

Amount of Each Disbursement this Period

98.00

B. Full Name (Last, First, Middle Initial)  
SUE MYRICK FOR CONGRESS

Mailing Address 1850 E. THIRD ST. SUITE 350

City CHARLOTTE State NC Zip Code 28209

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NC District: 9

Transaction ID: B23M053106-1304

Date of Disbursement

05 / 08 / 2006

Amount of Each Disbursement this Period

80.00

C. Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN PETERSON

Mailing Address H. MICHAEL VINOPAL TREASURER  
114 WEST STATE STREET

City PLEASANTVILLE State PA Zip Code 16341

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: PA District: 5

Transaction ID: B23M053106-1305

Date of Disbursement

05 / 23 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

678.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF JOE PITTS</b>		<b>Transaction ID: B23M053106-1306</b>	
Mailing Address A. DUER PIERCE TREASURER P.O. BOX 775		Date of Disbursement 05 / 01 / 2006	
City UNIONVILLE	State PA	Zip Code 19375	Amount of Each Disbursement this Period 98.00
Purpose of Disbursement BLAST FAX - House Candidate		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA	District: 16		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JOE PITTS</b>		<b>Transaction ID: B23M053106-1307</b>	
Mailing Address A. DUER PIERCE TREASURER P.O. BOX 775		Date of Disbursement 05 / 30 / 2006	
City UNIONVILLE	State PA	Zip Code 19375	Amount of Each Disbursement this Period 98.00
Purpose of Disbursement BLAST FAX - House Candidate		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA	District: 16		

Full Name (Last, First, Middle Initial) <b>C. RICHARD POMBO FOR CONGRESS</b>		<b>Transaction ID: B23M053106-1308</b>	
Mailing Address RANDALL POMBO TREASURER 7527 WEST LINNE ROAD		Date of Disbursement 05 / 15 / 2006	
City TRACY	State CA	Zip Code 95376	Amount of Each Disbursement this Period 98.00
Purpose of Disbursement BLAST FAX - House Candidate		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA	District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>294.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A. RICHARD POMBO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address **RANDALL POMBO TREASURER  
7527 WEST LINNE ROAD**

City **TRACY** State **CA** Zip Code **95376**

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: **CA** District: **11**

**Transaction ID: B23M053106-1309**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B. PRICE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address **PO BOX 425**

City **ROSWELL** State **GA** Zip Code **30077**

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: **GA** District: **6**

**Transaction ID: B23M053106-1310**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C. FRIENDS OF DAVE REICHERT**

Full Name (Last, First, Middle Initial)

Mailing Address **PO BOX 53322**

City **BELLEVUE** State **WA** Zip Code **98015**

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: **WA** District: **8**

**Transaction ID: B23M053106-1311**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**294.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RICK RENZI FOR CONGRESS</b>		Transaction ID: B23M053106-1312 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address PO BOX 2383		Amount of Each Disbursement this Period 98.00
City PRESCOTT State AZ Zip Code 86302	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 1	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. MIKE ROGERS FOR CONGRESS</b>		Transaction ID: B23M053106-1313 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address P.O. BOX 581		Amount of Each Disbursement this Period 98.00
City BRIGHTON State MI Zip Code 48116	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. JIM RYUN FOR CONGRESS</b>		Transaction ID: B23M053106-1314 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address STEVE ILISS TREASURER P.O. BOX 826		Amount of Each Disbursement this Period 19.60
City TOPEKA State KS Zip Code 66601	Purpose of Disbursement BLAST FAX - House Candidate Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	215.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2310 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JIM RYUN FOR CONGRESS</b>		Transaction ID: B23M053106-1315 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address STEVE ILISS TREASURER P.O. BOX 826		Amount of Each Disbursement this Period 98.00
City TOPEKA	State KS	
Zip Code 66601		Category/ Type
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 2		

Full Name (Last, First, Middle Initial) <b>B. THE SENSENBRENNER COMMITTEE</b>		Transaction ID: B23M053106-1316 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address JOHN SAVAGE TREASURER P.O. BOX 575		Amount of Each Disbursement this Period 98.00
City BROOKFIELD	State WI	
Zip Code 53008		Category/ Type
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WI District: 5		

Full Name (Last, First, Middle Initial) <b>C. THE SENSENBRENNER COMMITTEE</b>		Transaction ID: B23M053106-1317 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address JOHN SAVAGE TREASURER P.O. BOX 575		Amount of Each Disbursement this Period 98.00
City BROOKFIELD	State WI	
Zip Code 53008		Category/ Type
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WI District: 5		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	294.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF CLAY SHAW</b>		Transaction ID: B23M053106-1318 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address DARYL HINKLE TREASURER P.O. BOX 2188		Amount of Each Disbursement this Period 19.60
City FT. LAUDERDALE	State FL	
Zip Code 33321		Category/ Type
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 22	

Full Name (Last, First, Middle Initial) <b>B. VOLUNTEERS FOR SHIMKUS</b>		Transaction ID: B23M053106-1319 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address GERY HEPBORN TREASURER P.O. BOX 5458		Amount of Each Disbursement this Period 98.00
City SPRINGFIELD	State IL	
Zip Code 62704		Category/ Type
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 19	

Full Name (Last, First, Middle Initial) <b>C. VOLUNTEERS FOR SHIMKUS</b>		Transaction ID: B23M053106-1320 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address GERY HEPBORN TREASURER P.O. BOX 5458		Amount of Each Disbursement this Period 98.00
City SPRINGFIELD	State IL	
Zip Code 62704		Category/ Type
Purpose of Disbursement BLAST FAX - House Candidate		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 19	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	215.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A. VOLUNTEERS FOR SHIMKUS**

Mailing Address GERY HEPBORN TREASURER  
P.O. BOX 5458

City SPRINGFIELD State IL Zip Code 62704

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: IL District: 19

Transaction ID: B23M053106-1321

Date of Disbursement

05 / 25 / 2006

Amount of Each Disbursement this Period

98.00

Full Name (Last, First, Middle Initial)  
**B. ROB SIMMONS FOR CONGRESS**

Mailing Address 268 NORTH MAIN STREET

City STONINGTON State CT Zip Code 06378

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: CT District: 2

Transaction ID: B23M053106-1322

Date of Disbursement

05 / 01 / 2006

Amount of Each Disbursement this Period

98.00

Full Name (Last, First, Middle Initial)  
**C. ROB SIMMONS FOR CONGRESS**

Mailing Address 268 NORTH MAIN STREET

City STONINGTON State CT Zip Code 06378

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: CT District: 2

Transaction ID: B23M053106-1323

Date of Disbursement

05 / 02 / 2006

Amount of Each Disbursement this Period

98.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

294.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ROB SIMMONS FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1324
Mailing Address 268 NORTH MAIN STREET		Date of Disbursement 05 / 25 / 2006
City STONINGTON	State CT	Zip Code 06378
Purpose of Disbursement BLAST FAX - House Candidate		Amount of Each Disbursement this Period 98.00
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT	District: 2	

Full Name (Last, First, Middle Initial) <b>B. ROB SIMMONS FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1325
Mailing Address 268 NORTH MAIN STREET		Date of Disbursement 05 / 30 / 2006
City STONINGTON	State CT	Zip Code 06378
Purpose of Disbursement BLAST FAX - House Candidate		Amount of Each Disbursement this Period 98.00
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT	District: 2	

Full Name (Last, First, Middle Initial) <b>C. SIMPSON FOR CONGRESS</b>		<b>Transaction ID:</b> B23M053106-1326
Mailing Address P.O. BOX 1541		Date of Disbursement 05 / 19 / 2006
City BOISE	State ID	Zip Code 83701
Purpose of Disbursement BLAST FAX - House Candidate		Amount of Each Disbursement this Period 98.00
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ID	District: 2	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>294.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
JOHN SWEENEY FOR CONGRESS

Mailing Address 285 BROADWAY

City SARATOGA SPRING State NY Zip Code 12866

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Transaction ID: B23M053106-1327

Date of Disbursement

05 / 19 / 2006

Amount of Each Disbursement this Period

98.00

**B.** Full Name (Last, First, Middle Initial)  
CHARLES TAYLOR FOR CONGRESS

Mailing Address BRUCE BRIGGS TREASURER  
P.O. BOX 2355

City ASHEVILLE State NC Zip Code 28802

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NC District: 11

Transaction ID: B23M053106-1328

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

98.00

**C.** Full Name (Last, First, Middle Initial)  
TODD TIAHRT FOR CONGRESS

Mailing Address GEORGE BRUCE TREASURER  
2250 NORTH ROCK ROAD #118-A

City WICHITA State KS Zip Code 67226

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: KS District: 4

Transaction ID: B23M053106-1329

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

98.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

294.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. TODD TIAHRT FOR CONGRESS</b>		Transaction ID: B23M053106-1330 Date of Disbursement 05 / 15 / 2006
Mailing Address GEORGE BRUCE TREASURER 2250 NORTH ROCK ROAD #118-A		Amount of Each Disbursement this Period 98.00
City WICHITA	State KS	
Zip Code 67226	Purpose of Disbursement BLAST FAX - House Candidate	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2006	State: KS District: 4	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. WALSH FOR CONGRESS COMMITTEE</b>		Transaction ID: B23M053106-1331 Date of Disbursement 05 / 23 / 2006
Mailing Address EDWARD MORAN TREASURER P.O. BOX 1974		Amount of Each Disbursement this Period 625.00
City SYRACUSE	State NY	
Zip Code 13201	Purpose of Disbursement SATELLITE SERVICES - House Candidate	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2006	State: NY District: 25	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. CURT WELDON FOR CONGRESS COMM.</b>		Transaction ID: B23M053106-1332 Date of Disbursement 05 / 08 / 2006
Mailing Address PETER BARSZ TREASURER P.O. BOX 1992		Amount of Each Disbursement this Period 98.00
City MEDIA	State PA	
Zip Code 19063	Purpose of Disbursement BLAST FAX - House Candidate	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2006	State: PA District: 7	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	821.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAVE WELDON COMM.</b>		<b>Transaction ID:</b> B23M053106-1333 Date of Disbursement
Mailing Address TOM FLAVIN TREASURER P.O. BOX 968		<input type="text" value="05"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MELBOURNE	State FL	Zip Code 32902
Purpose of Disbursement BLAST FAX - House Candidate		<input type="text" value="98.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 15		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAVE WELDON COMM.</b>		<b>Transaction ID:</b> B23M053106-1334 Date of Disbursement
Mailing Address TOM FLAVIN TREASURER P.O. BOX 968		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MELBOURNE	State FL	Zip Code 32902
Purpose of Disbursement BLAST FAX - House Candidate		<input type="text" value="98.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 15		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAVE WELDON COMM.</b>		<b>Transaction ID:</b> B23M053106-1335 Date of Disbursement
Mailing Address TOM FLAVIN TREASURER P.O. BOX 968		<input type="text" value="05"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MELBOURNE	State FL	Zip Code 32902
Purpose of Disbursement BLAST FAX - House Candidate		<input type="text" value="98.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 15		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="294.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
FRIENDS OF ROGER WICKER

Mailing Address JOHN NAIL TREASURER  
P.O. BOX 874

City TUPELO State MS Zip Code 38802

Purpose of Disbursement  
SATELLITE SERVICES - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: MS District: 1

Transaction ID: B23M053106-1336

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2006

Amount of Each Disbursement this Period

75.00

B. Full Name (Last, First, Middle Initial)  
ALASKANS FOR DON YOUNG

Mailing Address JACK BOHNERT TREASURER  
P.O. BOX 100298

City ANCHORAGE State AK Zip Code 99510

Purpose of Disbursement  
BLAST FAX - House Candidate

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: AK District:

Transaction ID: B23M053106-1337

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2006

Amount of Each Disbursement this Period

98.00

SUBTOTAL of Disbursements This Page (optional) .....

173.00

TOTAL This Period (last page this line number only) .....

19654.56

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Stephen G. Holt		<b>Transaction ID:</b> FF060404A0740003 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 61 Stevens Ave		Amount of Each Disbursement this Period 300.00
City Little Falls      State NJ      Zip Code 07424-2257		
Purpose of Disbursement		MEMO: REFUND
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Lionel Martinez		<b>Transaction ID:</b> FF060421A0390031 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 506 Expressway 83		Amount of Each Disbursement this Period 150.00
City Donna      State TX      Zip Code 78537-4112		
Purpose of Disbursement		MEMO: REFUND
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Peter A. Mangiameli		<b>Transaction ID:</b> FF060525.0870001 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 296 Broadway Ste 2		Amount of Each Disbursement this Period 2500.00
City Monticello      State NY      Zip Code 12701-1703		
Purpose of Disbursement		MEMO: REFUND
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ms. Theresa A. Sanders</b>		<b>Transaction ID:</b> IE060504.0010004 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3012 Main St		Amount of Each Disbursement this Period 700.00  MEMO: REFUND
City Buffalo State NY Zip Code 14214-1057		
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Mr. Gumeccindo A. Paulino</b>		<b>Transaction ID:</b> IE060505.0010194 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 324 Winslow Ave		Amount of Each Disbursement this Period 250.00  MEMO: REFUND
City Deland State FL Zip Code 32724-6114		
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Mr. Harry C. Taylor, II</b>		<b>Transaction ID:</b> IE060518.0010198 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1304 Hunters Ridge Rd		Amount of Each Disbursement this Period 1250.00  MEMO: REFUND
City Charleston State WV Zip Code 25314-2477		
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2320 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Robert Muller</b>		<b>Transaction ID:</b> IE060523.0010170 Date of Disbursement MM / DD / YYYY 05 / 23 / 2006
Mailing Address 4 Atrium Dr		Amount of Each Disbursement this Period 2500.00
City Albany State NY Zip Code 12205-1441	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	MEMO: REFUND
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Dr. Greg Adamson</b>		<b>Transaction ID:</b> IE060526.0010004 Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
Mailing Address 1324 N Hickory Hills Rd		Amount of Each Disbursement this Period 7500.00
City Metamora State IL Zip Code 61548-9418	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	MEMO: REFUND
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

10000.00

**TOTAL** This Period (last page this line number only) ..... ►

15150.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2321 / 2352

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
King For Congress

Mailing Address 126 Des Moines St.  
P.O. Box 576

City Odebolt State IA Zip Code 51458

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: FF060428A0010043

Date of Disbursement

<sup>M</sup> 0	<sup>M</sup> 5	/	<sup>D</sup> 0	<sup>D</sup> 3	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 6
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Amount of Each Disbursement this Period

5000.00
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MEMO: REFUND

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00
---------

**TOTAL** This Period (last page this line number only) .....

5000.00
---------

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee  
CONQUEST COMMUNICATIONS GROUP

Mailing Address  
2812 EMERYWOOD PARKWAY  
SUITE 103

City State Zip Code  
RICHMOND VA 23294-3718

Purpose of Expenditure  
Phone Banks

Category/Type **007**

Name of Federal Candidate supported or Opposed by expenditure:  
FRIENDS OF CHARLIE WILSON

Calendar Year-To-Date Per Election for Office Sought **642244.35**

Date  
M M / D D / Y Y Y Y  
**05 / 02 / 2006**

Amount  
**1041.06**

Transaction ID: E053106-1338

Office Sought:  House State: OH  
 Senate District: 6  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : PRIMARY ELECTION

Full Name (Last, First, Middle, Initial) of Payee  
CONQUEST COMMUNICATIONS GROUP

Mailing Address  
2812 EMERYWOOD PARKWAY  
SUITE 103

City State Zip Code  
RICHMOND VA 23294-3718

Purpose of Expenditure  
Phone Banks

Category/Type **007**

Name of Federal Candidate supported or Opposed by expenditure:  
FRIENDS OF CHARLIE WILSON

Calendar Year-To-Date Per Election for Office Sought **642244.35**

Date  
M M / D D / Y Y Y Y  
**05 / 02 / 2006**

Amount  
**1011.96**

Transaction ID: E053106-1339

Office Sought:  House State: OH  
 Senate District: 6  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : PRIMARY ELECTION

(a) SUBTOTAL of Itemized Independent Expenditures .....	<b>2053.02</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<b>0.00</b>
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
**06 / 20 / 2006**

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
FEATHER LARSON & SYNHORST DCI

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Mailing Address  
2401 W. BEHREND DRIVE SUITE 7

Amount  
2970.84

City State Zip Code  
PHOENIX AZ 85027

Transaction ID: E053106-1340  
Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Purpose of Expenditure  
Phone Banks

Category/  
Type 007

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
FEATHER LARSON & SYNHORST DCI

Date  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Mailing Address  
2401 W. BEHREND DRIVE SUITE 7

Amount  
2970.66

City State Zip Code  
PHOENIX AZ 85027

Transaction ID: E053106-1341  
Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Purpose of Expenditure  
Phone Banks

Category/  
Type 007

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	5941.50
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
FEATHER LARSON & SYNHORST DCI

Date  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Mailing Address  
2401 W. BEHREND DRIVE SUITE 7

Amount  
3714.90

City State Zip Code  
PHOENIX AZ 85027

Transaction ID: E053106-1342  
Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Purpose of Expenditure  
Phone Banks  
Category/Type 007

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
FEATHER LARSON & SYNHORST DCI

Date  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Mailing Address  
2401 W. BEHREND DRIVE SUITE 7

Amount  
3578.28

City State Zip Code  
PHOENIX AZ 85027

Transaction ID: E053106-1343  
Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Purpose of Expenditure  
Phone Banks  
Category/Type 007

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	7293.18
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
FEATHER LARSON & SYNHORST DCI

---

Mailing Address  
2401 W. BEHREND DRIVE SUITE 7

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City PHOENIX	State AZ	Zip Code 85027
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Purpose of Expenditure Phone Banks	Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>
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Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

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Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">4046988.21</span>
---	--

Date  

M 05	D 31	Y 2006
---------	---------	-----------

Amount  
3579.42

**Transaction ID:** E053106-1344

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

---

Mailing Address  
925 UNIVERSITY AVE.

---

City SACRAMENTO	State CA	Zip Code 95825
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Purpose of Expenditure Mailing Service	Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>
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Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

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Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">4046988.21</span>
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Date  

M 05	D 10	Y 2006
---------	---------	-----------

Amount  
28079.34

**Transaction ID:** E053106-1347

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px; text-align: right;">31658.76</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px; text-align: right;">0.00</span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px; text-align: right;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
 Signature \_\_\_\_\_ Date 06 / 20 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Expenditure Mailing Service	Category/ Type	003
---	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	0	6

Amount

2872.26
---------

Transaction ID: E053106-1348

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Expenditure Mailing Service	Category/ Type	003
---	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	0	6

Amount

22800.00
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Transaction ID: E053106-1349

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	25672.26
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	0	6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City SACRAMENTO	State CA	Zip Code 95825
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Purpose of Expenditure Mailing Service	Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>
---	---

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Amount  
2872.26

Transaction ID: E053106-1350

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City SACRAMENTO	State CA	Zip Code 95825
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Purpose of Expenditure Mailing Service	Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>
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Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

Amount  
2872.26

Transaction ID: E053106-1351

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">5744.52</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date 0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City State Zip Code  
SACRAMENTO CA 95825

Purpose of Expenditure  
Phone Banks

Category/Type **007**

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought **4046988.21**

Date  
M M / D D / Y Y Y Y  
**05 / 22 / 2006**

Amount  
**2715.60**

Transaction ID: E053106-1352

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City State Zip Code  
SACRAMENTO CA 95825

Purpose of Expenditure  
Phone Banks

Category/Type **007**

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought **4046988.21**

Date  
M M / D D / Y Y Y Y  
**05 / 22 / 2006**

Amount  
**1153.68**

Transaction ID: E053106-1353

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	<b>3869.28</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<b>0.00</b>
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
**06 / 20 / 2006**

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Expenditure Phone Banks	Category/ Type	007
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Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Amount  
1153.68

Transaction ID: E053106-1354

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Expenditure Phone Banks	Category/ Type	007
---------------------------------------	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Amount  
2715.60

Transaction ID: E053106-1355

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	3869.28
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Expenditure Mailing Service	Category/ Type	003
---	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Amount  
22800.00

Transaction ID: E053106-1356

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Expenditure Mailing Service	Category/ Type	003
---	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Amount  
27950.00

Transaction ID: E053106-1357

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">50750.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(c) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City SACRAMENTO	State CA	Zip Code 95825
--------------------	-------------	-------------------

Purpose of Expenditure Mailing Service	Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>
---	---

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">4046988.21</span>
---	--

Date  

M M / D D / Y Y Y Y
0 5 / 2 2 / 2 0 0 6

Amount  
28333.13

**Transaction ID:** E053106-1358

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City SACRAMENTO	State CA	Zip Code 95825
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Purpose of Expenditure Phone Banks	Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>
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Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">4046988.21</span>
---	--

Date  

M M / D D / Y Y Y Y
0 5 / 2 2 / 2 0 0 6

Amount  
2872.26

**Transaction ID:** E053106-1359

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">31205.39</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px; height: 20px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date 

M M	D D	Y Y Y Y
0 6	2 0	2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City State Zip Code  
SACRAMENTO CA 95825

Purpose of Expenditure Category/Type  
Phone Banks 007

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought 4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Amount  
2700.00

Transaction ID: E053106-1360

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City State Zip Code  
SACRAMENTO CA 95825

Purpose of Expenditure Category/Type  
Get out the Vote Door to Door

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought 4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Amount  
80000.00

Transaction ID: E053106-1361

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>82700.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<b>0.00</b>
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Date  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Mailing Address  
925 UNIVERSITY AVE.

Amount  
10000.00

City State Zip Code  
SACRAMENTO CA 95825

Transaction ID: E053106-1362

Purpose of Expenditure  
Political Consultant Fees  
Category/Type 001

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Date  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Mailing Address  
925 UNIVERSITY AVE.

Amount  
5000.00

City State Zip Code  
SACRAMENTO CA 95825

Transaction ID: E053106-1363

Purpose of Expenditure  
Political Consultant Fees  
Category/Type 001

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Expenditure Phone Banks	Category/ Type	007
---------------------------------------	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	6

Amount

2715.60
---------

Transaction ID: E053106-1364

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Expenditure Phone Banks	Category/ Type	007
---------------------------------------	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	6

Amount

1153.68
---------

Transaction ID: E053106-1365

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	3869.28
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	0	6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City State Zip Code  
SACRAMENTO CA 95825

Purpose of Expenditure Category/Type  
Phone Banks 007

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
MM / DD / YYYY  
05 / 31 / 2006

Amount  
1504.50

Transaction ID: E053106-1366

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
PUBLIC OPINION STRATEGIES

Mailing Address  
214 NORTH FAYETTE STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type  
Survey 005

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
MM / DD / YYYY  
05 / 10 / 2006

Amount  
22500.00

Transaction ID: E053106-1367

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	24004.50
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date  
MM / DD / YYYY  
06 / 20 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee  
PUBLIC OPINION STRATEGIES

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Mailing Address  
214 NORTH FAYETTE STREET

Amount  
47000.00

City State Zip Code  
ALEXANDRIA VA 22314

Transaction ID: E053106-1368  
Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Purpose of Expenditure  
Survey

Category/  
Type 005

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

Full Name (Last, First, Middle, Initial) of Payee  
PUBLIC OPINION STRATEGIES

Date  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 6

Mailing Address  
214 NORTH FAYETTE STREET

Amount  
5000.00

City State Zip Code  
ALEXANDRIA VA 22314

Transaction ID: E053106-1369  
Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Purpose of Expenditure  
Survey

Category/  
Type 005

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Calendar Year-To-Date Per Election  
for Office Sought 4046988.21

(a) SUBTOTAL of Itemized Independent Expenditures .....	52000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
STRATEGIC MEDIA SERVICES

Mailing Address  
1023 31ST ST. NW  
4TH FLOOR

City State Zip Code  
WASHINGTON DC 20007

Purpose of Expenditure Category/Type  
Issue Ad Placement 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
MM / DD / YYYY  
05 / 10 / 2006

Amount  
242033.75

Transaction ID: E053106-1370

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
STRATEGIC MEDIA SERVICES

Mailing Address  
1023 31ST ST. NW  
4TH FLOOR

City State Zip Code  
WASHINGTON DC 20007

Purpose of Expenditure Category/Type  
Issue Ad Placement 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
MM / DD / YYYY  
05 / 10 / 2006

Amount  
283976.25

Transaction ID: E053106-1371

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	526010.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date  
MM / DD / YYYY  
06 / 20 / 2006

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
STRATEGIC MEDIA SERVICES

---

Mailing Address  
1023 31ST ST. NW  
4TH FLOOR

---

City WASHINGTON	State DC	Zip Code 20007
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Purpose of Expenditure Issue Ad Placement	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

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Calendar Year-To-Date Per Election for Office Sought	4046988.21
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Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

---

Amount  
143787.25

**Transaction ID:** E053106-1372

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Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
STRATEGIC MEDIA SERVICES

---

Mailing Address  
1023 31ST ST. NW  
4TH FLOOR

---

City WASHINGTON	State DC	Zip Code 20007
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Purpose of Expenditure Issue Ad Placement	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

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Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

---

Amount  
143787.25

**Transaction ID:** E053106-1373

---

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	287574.50
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	0.00
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
STRATEGIC MEDIA SERVICES

Mailing Address  
1023 31ST ST. NW  
4TH FLOOR

City State Zip Code  
WASHINGTON DC 20007

Purpose of Expenditure Category/Type  
Issue Ad Placement 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought 4046988.21

Date  
MM / DD / YYYY  
05 / 22 / 2006

Amount  
569622.25

Transaction ID: E053106-1374

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
STRATEGIC MEDIA SERVICES

Mailing Address  
1023 31ST ST. NW  
4TH FLOOR

City State Zip Code  
WASHINGTON DC 20007

Purpose of Expenditure Category/Type  
Issue Ad Placement 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought 4046988.21

Date  
MM / DD / YYYY  
05 / 25 / 2006

Amount  
694170.50

Transaction ID: E053106-1375

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	1263792.75
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date MM / DD / YYYY  
06 / 20 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

---

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

---

City ALEXANDRIA	State VA	Zip Code 22314
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Purpose of Expenditure Mailing Service	Category/ Type 003
---	--------------------------

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Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

---

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

---

Amount  
23173.35

Transaction ID: E053106-1376

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Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

---

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

---

City ALEXANDRIA	State VA	Zip Code 22314
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Purpose of Expenditure Mailing Service	Category/ Type 003
---	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

---

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date  
M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 6

---

Amount  
10330.45

Transaction ID: E053106-1377

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Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	33503.80
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type  
Mailing Service 003

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought 4046988.21

Date  
MM / DD / YYYY  
05 / 22 / 2006

Amount  
12745.08

Transaction ID: E053106-1378

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type  
Mailing Service 003

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought 4046988.21

Date  
MM / DD / YYYY  
05 / 22 / 2006

Amount  
18896.13

Transaction ID: E053106-1379

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	31641.21
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date MM / DD / YYYY  
06 / 20 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

---

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

---

City	State	Zip Code
ALEXANDRIA	VA	22314

---

Purpose of Expenditure Mailing Service	Category/ Type	003
---	-------------------	-----

---

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

---

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

---

Amount  
18896.13

Transaction ID: E053106-1380

---

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

---

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

---

City	State	Zip Code
ALEXANDRIA	VA	22314

---

Purpose of Expenditure Mailing Service	Category/ Type	003
---	-------------------	-----

---

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

---

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

---

Amount  
19427.06

Transaction ID: E053106-1381

---

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	38323.19
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type  
Mailing Service 003

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Amount  
19190.55

Transaction ID: E053106-1382

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type  
Mailing Service 003

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Amount  
20649.15

Transaction ID: E053106-1383

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	39839.70
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type  
Mailing Service 003

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Amount  
20818.19

Transaction ID: E053106-1384

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type  
Mailing Service 003

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Amount  
11907.00

Transaction ID: E053106-1385

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	32725.19
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date  
M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

Date  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

Amount  
7052.72

City State Zip Code  
ALEXANDRIA VA 22314

Transaction ID: E053106-1386  
Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Purpose of Expenditure Category/Type  
Mailing Service 003

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
UPGRADE FILMS LLC

Date  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

Mailing Address  
1023 31ST STREET NW  
4TH FLOOR

Amount  
8352.00

City State Zip Code  
WASHINGTON DC 20007

Transaction ID: E053106-1387  
Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Purpose of Expenditure Category/Type  
Issue Ad Production 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	15404.72
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
UPGRADE FILMS LLC

Mailing Address  
1023 31ST STREET NW  
4TH FLOOR

City State Zip Code  
WASHINGTON DC 20007

Purpose of Expenditure Category/Type  
Issue Ad Production 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
MM / DD / YYYY  
05 / 22 / 2006

Amount  
4133.50

Transaction ID: E053106-1388

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
UPGRADE FILMS LLC

Mailing Address  
1023 31ST STREET NW  
4TH FLOOR

City State Zip Code  
WASHINGTON DC 20007

Purpose of Expenditure Category/Type  
Issue Ad Production 004

Name of Federal Candidate supported or Opposed by expenditure:  
Brian Bilbray

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
MM / DD / YYYY  
05 / 22 / 2006

Amount  
4133.50

Transaction ID: E053106-1389

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	8267.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date  
MM / DD / YYYY  
06 / 20 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
UPGRADE FILMS LLC

Mailing Address  
1023 31ST STREET NW  
4TH FLOOR

City: WASHINGTON State: DC Zip Code: 20007

Purpose of Expenditure: Issue Ad Production Category/Type: 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought: 4046988.21

Date: 05 / 25 / 2006

Amount: 8644.06

Transaction ID: E053106-1390

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify): SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
UPGRADE FILMS LLC

Mailing Address  
1023 31ST STREET NW  
4TH FLOOR

City: WASHINGTON State: DC Zip Code: 20007

Purpose of Expenditure: Issue Ad Production Category/Type: 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought: 4046988.21

Date: 05 / 25 / 2006

Amount: 9335.95

Transaction ID: E053106-1391

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify): SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	17980.01
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date: 06 / 20 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee  
UPGRADE FILMS LLC

Mailing Address  
1023 31ST STREET NW  
4TH FLOOR

City State Zip Code  
WASHINGTON DC 20007

Purpose of Expenditure Category/Type  
Issue Ad Production 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
05 / 25 / 2006

Amount  
1972.00  
Transaction ID: E053106-1392

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
UPGRADE FILMS LLC

Mailing Address  
1023 31ST STREET NW  
4TH FLOOR

City State Zip Code  
WASHINGTON DC 20007

Purpose of Expenditure Category/Type  
Issue Ad Production 004

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought  
4046988.21

Date  
05 / 31 / 2006

Amount  
7799.83  
Transaction ID: E053106-1393

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	9771.83
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date 06 / 20 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City SACRAMENTO	State CA	Zip Code 95825
--------------------	-------------	-------------------

Purpose of Expenditure Phone Banks	Category/ Type 007
---------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date  

M M 0 5	D D 3 1	Y Y Y Y 2 0 0 6
------------	------------	--------------------

Amount  

3058.88
---------

Transaction ID: E053106-1394

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City SACRAMENTO	State CA	Zip Code 95825
--------------------	-------------	-------------------

Purpose of Expenditure Phone Banks	Category/ Type 007
---------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought	4046988.21
---	------------

Date  

M M 0 5	D D 3 1	Y Y Y Y 2 0 0 6
------------	------------	--------------------

Amount  

3058.88
---------

Transaction ID: E053106-1395

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	6117.76
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	0.00
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date  

M M 0 6	D D 2 0	Y Y Y Y 2 0 0 6
------------	------------	--------------------

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00075820
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
MERIDIAN PACIFIC INC.

Mailing Address  
925 UNIVERSITY AVE.

City State Zip Code  
SACRAMENTO CA 95825

Purpose of Expenditure Category/Type  
Phone Banks 007

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought 4046988.21

Date  
MM / DD / YYYY  
05 / 31 / 2006

Amount  
3058.88

Transaction ID: E053106-1396

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

Full Name (Last, First, Middle, Initial) of Payee  
TARGETED CREATIVE

Mailing Address  
COMMUNICATIONS INC.  
106 S. COLUMBUS ST.

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Expenditure Category/Type  
Mailing Service 003

Name of Federal Candidate supported or Opposed by expenditure:  
FRANCINE BUSBY FOR CONGRESS

Calendar Year-To-Date Per Election for Office Sought 4046988.21

Date  
MM / DD / YYYY  
05 / 31 / 2006

Amount  
23461.93

Transaction ID: E053106-1397

Office Sought:  House State: CA  
 Senate District: 50  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : SPECIAL RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures .....	26520.81
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRISTOPHER J. WARD  
Signature

Date MM / DD / YYYY  
06 / 20 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00075820	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee TARGETED CREATIVE		Date M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address COMMUNICATIONS INC. 106 S. COLUMBUS ST.		Amount 25852.87	
City State Zip Code ALEXANDRIA VA 22314		Transaction ID: E053106-1398	
Purpose of Expenditure Mailing Service		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 50 <input type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: FRANCINE BUSBY FOR CONGRESS		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : SPECIAL RUNOFF	
Calendar Year-To-Date Per Election for Office Sought		4046988.21	

(a) SUBTOTAL of Itemized Independent Expenditures .....	25852.87
(b) SUBTOTAL of Unitemized Independent Expenditures .....	0.00
(c) TOTAL Independent Expenditures .....	2708956.31
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
CHRISTOPHER J. WARD Signature	Date M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

PAGE 2352 / 2352  
FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	
If YES, name the designating committee: Republican National Committee AND California State Republican Party	Mailing Address 320 FIRST STREET SE	
	City WASHINGTON	State DC      ZIP Code 20003

Full Name (Last, First, Middle Initial) of Each Payee CERASOLI STAFFORD MEDIA MANAGEMENT LLC.		Purpose of Expenditure Issue Ad Placeme- nt	<input type="checkbox"/> Category/Type
Mailing Address 2251 SAN DIEGO AVENUE      SUITE A130			
City      State      ZIP Code SAN DIEGO      CA      92110		Date M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Name of Federal Candidate Supported Bilbray Brian	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: CA District: 50	Amount 74925.00
Aggregate General Election Expenditure for this Candidate ▶	74925.00		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
		Transaction ID: F053106-1399	

SUBTOTAL of Expenditures This Page (optional) .....	▶	74925.00
TOTAL This Period (last page this line number only) .....	▶	74925.00