

# 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  
The Leadership Circle PAC

ADDRESS (number and street) PO Box 2888  
 Check if different than previously reported. (ACC)  
Raleigh NC 27602

2. **FEC IDENTIFICATION NUMBER** C00394916  
**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 01 01 2006 through 03 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 Collin McMichael, Asst. Treasurer

Signature of Treasurer Electronically Filed by Collin McMichael, Asst. Treasurer Date 04 10 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  
The Leadership Circle PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	3

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		35542.76
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	35542.76									
(c) Total Receipts (from Line 19) .....	90450.00	90450.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	125992.76	125992.76								
7. Total Disbursements (from Line 31) .....	80768.46	80768.46								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	45224.30	45224.30								
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  
The Leadership Circle PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	3

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	58250.00	58250.00
(i) Itemized (use Schedule A) .....	200.00	200.00
(ii) Unitemized .....	58450.00	58450.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	32000.00	32000.00
(c) Other Political Committees (such as PACs) .....	90450.00	90450.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	90450.00	90450.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	90450.00	90450.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	53268.46	53268.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	53268.46	53268.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27500.00	27500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	80768.46	80768.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	80768.46	80768.46

**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) .....	90450.00	90450.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	90450.00	90450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	53268.46	53268.46
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	53268.46	53268.46

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)  
The Leadership Circle PAC

**A.** Full Name (Last, First, Middle Initial)  
MR. James Goodnight

Mailing Address 900 Appletree Ln

City Cary State NC Zip Code 27513-3000

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

Name of Employer SAS Institute, Inc. Occupation CEO/President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 27 / 2006

Transaction ID: 60330.C1711

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Hester, , JR

Mailing Address 857 S Beckford Dr Ste A

City Henderson State NC Zip Code 27536-3486

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

Name of Employer Self-employed Occupation Builder

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2006

Transaction ID: 60330.C1714

Amount of Each Receipt this Period  
2500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Mr. Luther Hodges, , JR

Mailing Address 20114 Scott

City Chapel Hill State NC Zip Code 27517-8558

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

Name of Employer Self Employed Occupation Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 13 / 2006

Transaction ID: 60330.C1700

Amount of Each Receipt this Period  
5000.00

Receipt

<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 7 / 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

**A.** Full Name (Last, First, Middle Initial)  
MRS. Dorothy Hungerford

Mailing Address PO Box 14

City State Zip Code  
Wrightsville Beach NC 28480-0014

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 ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 09 / 2006

Transaction ID: 60314.C1692

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
DR. Holly Johnson

Mailing Address 917 Williamson Dr

City State Zip Code  
Raleigh NC 27608-2307

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

Name of Employer Occupation  
Raleigh Eye Associates Ophthalmologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 27 / 2006

Transaction ID: 60330.C1709

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Mr. C. David Johnson, ., JR

Mailing Address 917 Williamson Dr

City State Zip Code  
Raleigh NC 27608-2307

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

Name of Employer Occupation  
Johnson Lexus Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 27 / 2006

Transaction ID: 60330.C1708

Amount of Each Receipt this Period  
5000.00

Receipt

<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 8 / 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

**A.** Full Name (Last, First, Middle Initial)  
MR. William Matthews

Mailing Address 1925 N.Flagler Drive

City State Zip Code  
West Palm Beach FL 33407

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

Name of Employer Self-employed Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 06 / 2006

Transaction ID: 60314.C1688

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
MR. Oscar Persons

Mailing Address 1 Atlantic Ctr  
1201 West Peachtree Street

City State Zip Code  
Atlanta GA 30309-3449

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

Name of Employer Self Employed 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  
03 / 07 / 2006

Transaction ID: 60314.C1689

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Senator Robert M. Pittenger

Mailing Address 7730 Baltursol Ln

City State Zip Code  
Charlotte NC 28210

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

Name of Employer Robert Pittenger Co., Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 16 / 2006

Transaction ID: 60314.C1684

Amount of Each Receipt this Period  
10000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (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 / 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

**A.** Full Name (Last, First, Middle Initial)  
Senator Robert M. Pittenger

Mailing Address 7730 Baltursol Ln

City State Zip Code  
Charlotte NC 28210

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

Name of Employer: Robert Pittenger Co., Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2006

Transaction ID: 60314.C1685

Amount of Each Receipt this Period  
-5000.00

Reattribution Memo

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
MRS. Suzanne Pittenger

Mailing Address 7730 Baltursol Ln

City State Zip Code  
Charlotte NC 28210

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 ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2006

Transaction ID: 60314.C1686

Amount of Each Receipt this Period  
5000.00

Reattribution Memo

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
MR. Joseph Reppert

Mailing Address 326 Snell Isle Blvd NE

City State Zip Code  
Saint Petersburg FL 33704-3648

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

Name of Employer: First American Real Estate Inc Occupation: Vice Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 27 / 2006

Transaction ID: 60330.C1707

Amount of Each Receipt this Period  
5000.00

Receipt

<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 10 / 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. MRS. Sally Dalton Robinson</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6	
Mailing Address 3829 Bonwood Dr		<b>Transaction ID: 60314.C1687</b>	
City State Zip Code Charlotte NC 28211-1752	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Self-employed Occupation Volunteer	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. Doc J.thurston,, III</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6	
Mailing Address 473 Hempstead Pl		<b>Transaction ID: 60330.C1712</b>	
City State Zip Code Charlotte NC 28207-2315	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Self Employed Occupation Investor	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. Phyllis Washington</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6	
Mailing Address PO Box 18182		<b>Transaction ID: 60330.C1710</b>	
City State Zip Code Missoula MT 59807	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Receipt		
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			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	58250.00

**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 11 / 34
	<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)  
The Leadership Circle PAC

**A.** Full Name (Last, First, Middle Initial)  
Intl Union of Painters & Allied Trades

Mailing Address Political Action Together Politica  
1750 New York Avenue NW

City State Zip Code  
Washington DC 20006-5301

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 27 / 2006

Transaction ID: 60330.C1703

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Koch Industries PAC

Mailing Address 655 15th St NW Ste 445

City State Zip Code  
Washington DC 20005-5727

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 20 / 2006

Transaction ID: 60330.C1694

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Mortgage Bankers Association PAC

Mailing Address 1919 Pennsylvania Ave NW FI 7

City State Zip Code  
Washington DC 20006-3404

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 23 / 2006

Transaction ID: 60330.C1699

Amount of Each Receipt this Period  
5000.00

Receipt

<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 12 / 34
	<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)  
The Leadership Circle PAC

**A.** Full Name (Last, First, Middle Initial)  
NC Farm Bureau - FARMPAC

Mailing Address PO Box 27766

City Raleigh State NC Zip Code 27611-3244

FEC ID number of contributing federal political committee. **C** C00216754

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 23 / 2006

Transaction ID: 60330.C1698

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Piper Rudnick LLP PAC

Mailing Address 1200 19th St NW

City Washington State DC Zip Code 20036-2402

FEC ID number of contributing federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: 60105.C1681

Amount of Each Receipt this Period  
2000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
RJR PAC

Mailing Address 1201 F St NW Ste 1000

City Washington State DC Zip Code 20004-1217

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 31 / 2006

Transaction ID: 60314.C1683

Amount of Each Receipt this Period  
5000.00

Receipt

<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:	PAGE 13 / 34
	(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)  
The Leadership Circle PAC

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

Mailing Address 2207 Bridgepointe Pkwy

City State Zip Code  
San Mateo CA 94404-5009

FEC ID number of contributing federal political committee. **C** C00364711

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	0	/	2	0	0	6

Transaction ID: 60124.C1682

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	32000.00

**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 14 / 34

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

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Alltel</b>		Transaction ID: 60124.E969 Date of Disbursement MM / DD / YYYY 01 / 09 / 2006	
Mailing Address PO Box 96019		Amount of Each Disbursement this Period 336.06	
City Charlotte State NC Zip Code 28296-0019	Purpose of Disbursement TELEPHONE	Category/ Type	
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) ▼	TELEPHONE	

Full Name (Last, First, Middle Initial) <b>B. Alltel</b>		Transaction ID: 60314.E996 Date of Disbursement MM / DD / YYYY 02 / 06 / 2006	
Mailing Address PO Box 96019		Amount of Each Disbursement this Period 320.48	
City Charlotte State NC Zip Code 28296-0019	Purpose of Disbursement TELEPHONE	Category/ Type	
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) ▼	TELEPHONE	

Full Name (Last, First, Middle Initial) <b>C. Alltel</b>		Transaction ID: 60314.E1017 Date of Disbursement MM / DD / YYYY 03 / 07 / 2006	
Mailing Address PO Box 96019		Amount of Each Disbursement this Period 148.38	
City Charlotte State NC Zip Code 28296-0019	Purpose of Disbursement TELEPHONE	Category/ Type	
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) ▼	TELEPHONE	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	804.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE 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 15 / 34

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

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Aristotle Publishing, Inc.</b>		Transaction ID: 60330.E1035 Date of Disbursement MM / DD / YYYY 03 / 16 / 2006	
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 399.50	
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement CREDIT CARD PROCESSISNG	Category/ Type	
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) ▼	CREDIT CARD PROCESSISNG	

Full Name (Last, First, Middle Initial) <b>B. Aristotle Publishing, Inc.</b>		Transaction ID: 60330.E1034 Date of Disbursement MM / DD / YYYY 03 / 23 / 2006	
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 399.50	
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement CREDIT CARD PROCESSING	Category/ Type	
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) ▼	CREDIT CARD PROCESSING	

Full Name (Last, First, Middle Initial) <b>C. Aristotle Publishing, Inc.</b>		Transaction ID: 60410.E1051 Date of Disbursement MM / DD / YYYY 03 / 31 / 2006	
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1403.00	
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement CREDIT CARD PROCESSING	Category/ Type	
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) ▼	CREDIT CARD PROCESSING	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2202.00
<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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. BellSouth</b>		Transaction ID: 60124.E980 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6	
Mailing Address PO Box 30188		Amount of Each Disbursement this Period 221.68	
City Charlotte State NC Zip Code 28230-0188	Purpose of Disbursement TELEPHONE		
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 TELEPHONE		

Full Name (Last, First, Middle Initial) <b>B. BellSouth</b>		Transaction ID: 60314.E1011 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6	
Mailing Address PO Box 30188		Amount of Each Disbursement this Period 229.01	
City Charlotte State NC Zip Code 28230-0188	Purpose of Disbursement TELEPHONE		
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 TELEPHONE		

Full Name (Last, First, Middle Initial) <b>C. BellSouth</b>		Transaction ID: 60330.E1032 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6	
Mailing Address PO Box 30188		Amount of Each Disbursement this Period 246.46	
City Charlotte State NC Zip Code 28230-0188	Purpose of Disbursement TELEPHONE		
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 TELEPHONE		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	697.15
<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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Lynda J. Blount</b>		Transaction ID: 60105.E967 Date of Disbursement 01 / 05 / 2006	
Mailing Address 618 West Washington Street		Amount of Each Disbursement this Period 222.72	
City Bethel State NC Zip Code 27812-	Purpose of Disbursement REIMBURSEMENT: SEE BELOW		
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		
		REIMBURSEMENT: SEE BELOW	

Full Name (Last, First, Middle Initial) <b>B. Sheraton Hotels - Capital</b>		Transaction ID: 60105.E968 Date of Disbursement 01 / 05 / 2006	
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 67.52	
City Raleigh State NC Zip Code 27601-	Purpose of Disbursement LODGING		
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		
		[MEMO ITEM] MEMO: LODGING	

Full Name (Last, First, Middle Initial) <b>C. Lynda J. Blount</b>		Transaction ID: 60124.E974 Date of Disbursement 01 / 12 / 2006	
Mailing Address 618 West Washington Street		Amount of Each Disbursement this Period 222.72	
City Bethel State NC Zip Code 27812-	Purpose of Disbursement REIMBURSEMENT: SEE BELOW		
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		
		REIMBURSEMENT: SEE BELOW	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	445.44
<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 18 / 34

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

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Sheraton Hotels - Capital</b>		Transaction ID: 60124.E975 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 6
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 67.52
City Raleigh State NC Zip Code 27601-	Purpose of Disbursement LODGING	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: LODGING

Full Name (Last, First, Middle Initial) <b>B. Lynda J. Blount</b>		Transaction ID: 60124.E982 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6
Mailing Address 618 West Washington Street		Amount of Each Disbursement this Period 656.56
City Bethel State NC Zip Code 27812-	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	
Candidate Name		Category/Type
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) ▼	REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial) <b>C. Capital Hilton</b>		Transaction ID: 60124.E983 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6
Mailing Address 1001 16th St NW		Amount of Each Disbursement this Period 255.86
City Washington State DC Zip Code 20036-5701	Purpose of Disbursement LODGING	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: LODGING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	656.56
<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)

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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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: 60124.E984 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6
Mailing Address 404 E Six Forks Rd		Amount of Each Disbursement this Period 39.20
City Raleigh State NC Zip Code 27609-7868	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) <b>B. Lynda J. Blount</b>		Transaction ID: 60126.E990 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 6
Mailing Address 618 West Washington Street		Amount of Each Disbursement this Period 135.04
City Bethel State NC Zip Code 27812-	Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name Category/Type	
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) ▼	REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial) <b>C. Sheraton Hotels - Capital</b>		Transaction ID: 60126.E991 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 6
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 135.04
City Raleigh State NC Zip Code 27601-	Purpose of Disbursement LODGING Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: LODGING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	135.04
<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 20 / 34

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

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

<b>A. Lynda J. Blount</b> Full Name (Last, First, Middle Initial) Mailing Address 618 West Washington Street City Bethel State NC Zip Code 27812-		<b>Transaction ID: 60314.E994</b> Date of Disbursement 02 / 02 / 2006 Amount of Each Disbursement this Period 290.24
Purpose of Disbursement REIMBURSEMENT: SEE BELOW 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) ▼		REIMBURSEMENT: SEE BELOW

<b>B. Sheraton Hotels - Capital</b> Full Name (Last, First, Middle Initial) Mailing Address Fayetteville Street Mall City Raleigh State NC Zip Code 27601-		<b>Transaction ID: 60314.E995</b> Date of Disbursement 02 / 02 / 2006 Amount of Each Disbursement this Period 135.04
Purpose of Disbursement LODGING 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) ▼		[MEMO ITEM] MEMO: LODGING

<b>C. Lynda J. Blount</b> Full Name (Last, First, Middle Initial) Mailing Address 618 West Washington Street City Bethel State NC Zip Code 27812-		<b>Transaction ID: 60314.E998</b> Date of Disbursement 02 / 06 / 2006 Amount of Each Disbursement this Period 259.10
Purpose of Disbursement REIMBURSEMENT: SEE BELOW 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) ▼		REIMBURSEMENT: SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	549.34
<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)

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

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Transaction ID: 60314.E999 Date of Disbursement MM / DD / YYYY 02 / 06 / 2006
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 39.30
City Pittsburgh State PA Zip Code 15250-7461	Purpose of Disbursement DELIVERY Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: DELIVERY

Full Name (Last, First, Middle Initial) <b>B. Lynda J. Blount</b>		Transaction ID: 60314.E997 Date of Disbursement MM / DD / YYYY 02 / 06 / 2006
Mailing Address 618 West Washington Street		Amount of Each Disbursement this Period 3000.00
City Bethel State NC Zip Code 27812-	Purpose of Disbursement PAC FUNDRAISING CONSULTING Candidate Name Category/Type	
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) ▼	PAC FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial) <b>C. Lynda J. Blount</b>		Transaction ID: 60314.E1006 Date of Disbursement MM / DD / YYYY 02 / 16 / 2006
Mailing Address 618 West Washington Street		Amount of Each Disbursement this Period 377.74
City Bethel State NC Zip Code 27812-	Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name Category/Type	
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) ▼	REIMBURSEMENT: SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3377.74
<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 22 / 34

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

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NAME OF COMMITTEE (In Full)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Sheraton Hotels - Capital</b>		<b>Transaction ID:</b> 60314.E1007 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 135.04
City Raleigh State NC Zip Code 27601-	[MEMO ITEM] MEMO: LODGING	
Purpose of Disbursement LODGING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Lynda J. Blount</b>		<b>Transaction ID:</b> 60314.E1015 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6
Mailing Address 618 West Washington Street		Amount of Each Disbursement this Period 3000.00
City Bethel State NC Zip Code 27812-	PAC FUNDRAISING CONSULTING	
Purpose of Disbursement PAC FUNDRAISING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Lynda J. Blount</b>		<b>Transaction ID:</b> 60314.E1023 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 618 West Washington Street		Amount of Each Disbursement this Period 249.90
City Bethel State NC Zip Code 27812-	TRAVEL REIMBURSEMENT	
Purpose of Disbursement TRAVEL REIMBURSEMENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3249.90
<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

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)  
The Leadership Circle PAC

<b>A. Lynda J. Blount</b> Full Name (Last, First, Middle Initial) Mailing Address 618 West Washington Street City Bethel State NC Zip Code 27812-		<b>Transaction ID: 60330.E1027</b> Date of Disbursement 03 / 20 / 2006 Amount of Each Disbursement this Period 315.59
Purpose of Disbursement REIMBURSEMENT: SEE BELOW 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) ▼		REIMBURSEMENT: SEE BELOW

<b>B. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address 404 E Six Forks Rd City Raleigh State NC Zip Code 27609-7868		<b>Transaction ID: 60330.E1028</b> Date of Disbursement 03 / 20 / 2006 Amount of Each Disbursement this Period 25.35
Purpose of Disbursement OFFICE SUPPLIES 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) ▼		[MEMO ITEM] MEMO: OFFICE SUPPLIES

<b>C. Lynda J. Blount</b> Full Name (Last, First, Middle Initial) Mailing Address 618 West Washington Street City Bethel State NC Zip Code 27812-		<b>Transaction ID: 60330.E1037</b> Date of Disbursement 03 / 27 / 2006 Amount of Each Disbursement this Period 515.72
Purpose of Disbursement PAC TRAVEL - MILEAGE 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) ▼		PAC TRAVEL - MILEAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	831.31
<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)

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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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Decatur House Museum</b>		<b>Transaction ID:</b> 60314.E1021 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 6
Mailing Address Special Events Department 1610 H Street, NW		Amount of Each Disbursement this Period 3700.00
City Washington State DC Zip Code 20006-	PAC EVENT/ROOM RENTAL	
Purpose of Disbursement PAC EVENT/ROOM RENTAL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		<b>Transaction ID:</b> 60105.E966 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 16.02
City Pittsburgh State PA Zip Code 15250-7461	DELIVERY	
Purpose of Disbursement DELIVERY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Federal Express</b>		<b>Transaction ID:</b> 60314.E1018 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 17.43
City Pittsburgh State PA Zip Code 15250-7461	DELIVERY	
Purpose of Disbursement DELIVERY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3733.45
<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)

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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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		<b>Transaction ID:</b> 60330.E1031 <b>Date of Disbursement</b> MM / DD / YYYY 03 / 20 / 2006
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 15.47
City Pittsburgh State PA Zip Code 15250-7461	Purpose of Disbursement DELIVERY Candidate Name <input type="checkbox"/> Category/Type	
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) ▼	DELIVERY

Full Name (Last, First, Middle Initial) <b>B. Tom Fetzer</b>		<b>Transaction ID:</b> 60314.E993 <b>Date of Disbursement</b> MM / DD / YYYY 01 / 30 / 2006
Mailing Address 709 Hillsborough St		Amount of Each Disbursement this Period 4000.00
City Raleigh State NC Zip Code 27603-1605	Purpose of Disbursement POLITICAL CONSULTING Candidate Name <input type="checkbox"/> Category/Type	
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) ▼	POLITICAL CONSULTING

Full Name (Last, First, Middle Initial) <b>C. Tom Fetzer</b>		<b>Transaction ID:</b> 60314.E1003 <b>Date of Disbursement</b> MM / DD / YYYY 02 / 14 / 2006
Mailing Address 709 Hillsborough St		Amount of Each Disbursement this Period 4000.00
City Raleigh State NC Zip Code 27603-1605	Purpose of Disbursement POLITICAL CONSULTING Candidate Name <input type="checkbox"/> Category/Type	
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) ▼	POLITICAL CONSULTING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8015.47
<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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Fetzer Stephens, Inc.</b>		<b>Transaction ID: 60105.E961</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 6	
Mailing Address 709 Hillsborough St		Amount of Each Disbursement this Period 1125.00	
City Raleigh State NC Zip Code 27603-1605	Purpose of Disbursement OFFICE RENT Candidate Name Category/Type		
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) ▼		

OFFICE RENT

Full Name (Last, First, Middle Initial) <b>B. Fetzer Stephens, Inc.</b>		<b>Transaction ID: 60314.E1004</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6	
Mailing Address 709 Hillsborough St		Amount of Each Disbursement this Period 1125.00	
City Raleigh State NC Zip Code 27603-1605	Purpose of Disbursement OFFICE RENT Candidate Name Category/Type		
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) ▼		

OFFICE RENT

Full Name (Last, First, Middle Initial) <b>C. Fetzer Stephens, Inc.</b>		<b>Transaction ID: 60314.E1020</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 6	
Mailing Address 709 Hillsborough St		Amount of Each Disbursement this Period 1125.00	
City Raleigh State NC Zip Code 27603-1605	Purpose of Disbursement OFFICE RENT Candidate Name Category/Type		
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) ▼		

OFFICE RENT

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3375.00</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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. First Citizens Bank - VISA</b>		<b>Transaction ID:</b> 60124.E976 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address PO Box 49500		Amount of Each Disbursement this Period 410.85
City Roanoke State VA Zip Code 24019-9500	CREDIT CARD: SEE BELOW	
Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. US Postal Service</b>		<b>Transaction ID:</b> 60124.E977 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 334.95
City Raleigh State NC Zip Code 27601-	[MEMO ITEM] MEMO: PAC POSTAGE	
Purpose of Disbursement PAC POSTAGE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. First Citizens Bank - VISA</b>		<b>Transaction ID:</b> 60330.E1024 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 6
Mailing Address PO Box 49500		Amount of Each Disbursement this Period 1433.86
City Roanoke State VA Zip Code 24019-9500	CREDIT CARD: SEE BELOW	
Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1844.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE 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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Dell, Inc.</b>		Transaction ID: 60330.E1025 Date of Disbursement MM / DD / YYYY 02 / 13 / 2006	
Mailing Address 1 Dell Way		Amount of Each Disbursement this Period 1433.86	
City Round Rock State TX Zip Code 78682-7000	Purpose of Disbursement COMPUTER	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: COMPUTER	

Full Name (Last, First, Middle Initial) <b>B. Jeffersons</b>		Transaction ID: 60124.E973 Date of Disbursement MM / DD / YYYY 01 / 12 / 2006	
Mailing Address 505 Red Banks Rd		Amount of Each Disbursement this Period 1365.32	
City Greenville State NC Zip Code 27858-5734	Purpose of Disbursement CONSTITUENT GIFTS	Category/ Type	
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) ▼	CONSTITUENT GIFTS	

Full Name (Last, First, Middle Initial) <b>C. Metro Mailing &amp; Printing</b>		Transaction ID: 60314.E1012 Date of Disbursement MM / DD / YYYY 02 / 23 / 2006	
Mailing Address 109 Winona St		Amount of Each Disbursement this Period 4458.69	
City Charlotte State NC Zip Code 28203-4149	Purpose of Disbursement PAC DIRECT MAIL PACKAGE	Category/ Type	
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) ▼	PAC DIRECT MAIL PACKAGE	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5824.01
<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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Metro Mailing &amp; Printing</b>		<b>Transaction ID:</b> 60330.E1030 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address 109 Winona St		Amount of Each Disbursement this Period 7650.31
City Charlotte State NC Zip Code 28203-4149	PAC DIRECT MAIL PACKAGE	
Purpose of Disbursement PAC DIRECT MAIL PACKAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. US Postal Service</b>		<b>Transaction ID:</b> 60105.E964 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 78.00
City Raleigh State NC Zip Code 27601-	PAC POSTAGE	
Purpose of Disbursement PAC POSTAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. US Postal Service</b>		<b>Transaction ID:</b> 60124.E972 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 6
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 160.00
City Raleigh State NC Zip Code 27601-	PAC BRM PERMIT	
Purpose of Disbursement PAC BRM PERMIT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>7888.31</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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. US Postal Service</b>		<b>Transaction ID:</b> 60314.E1022 <b>Date of Disbursement</b> MM / DD / YYYY 03 / 13 / 2006
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 156.00
City Raleigh State NC Zip Code 27601-	Purpose of Disbursement PAC POSTAGE	
Candidate Name		Category/ Type
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) ▼	PAC POSTAGE

Full Name (Last, First, Middle Initial) <b>B. US Postal Service</b>		<b>Transaction ID:</b> 60330.E1026 <b>Date of Disbursement</b> MM / DD / YYYY 03 / 14 / 2006
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 2041.20
City Raleigh State NC Zip Code 27601-	Purpose of Disbursement PAC POSTAGE	
Candidate Name		Category/ Type
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) ▼	PAC POSTAGE

Full Name (Last, First, Middle Initial) <b>C. US Postal Service</b>		<b>Transaction ID:</b> 60410.E1039 <b>Date of Disbursement</b> MM / DD / YYYY 03 / 31 / 2006
Mailing Address Fayetteville Street Mall		Amount of Each Disbursement this Period 25.20
City Raleigh State NC Zip Code 27601-	Purpose of Disbursement PAC POSTAGE	
Candidate Name		Category/ Type
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) ▼	PAC POSTAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2222.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE 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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Elizabeth W. Walters</b>		<b>Transaction ID:</b> 60314.E992 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 825 Federal House Ave		Amount of Each Disbursement this Period 2000.00
City Wake Forest State NC Zip Code 27587-4624	FUNDRAISING CONSULTING	
Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Elizabeth W. Walters</b>		<b>Transaction ID:</b> 60314.E1008 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6
Mailing Address 825 Federal House Ave		Amount of Each Disbursement this Period 2000.00
City Wake Forest State NC Zip Code 27587-4624	FUNDRAISING CONSULTING	
Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Elizabeth W. Walters</b>		<b>Transaction ID:</b> 60330.E1029 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address 825 Federal House Ave		Amount of Each Disbursement this Period 2500.00
City Wake Forest State NC Zip Code 27587-4624	FUNDRAISING CONSULTING	
Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>6500.00</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)  
The Leadership Circle PAC

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth W. Walters

Mailing Address 825 Federal House Ave

City Wake Forest State NC Zip Code 27587-4624

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 60330.E1036

Date of Disbursement

/   /

Amount of Each Disbursement this Period

FUNDRAISING CONSULTING

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**500.00**

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

**52852.75**



# SCHEDULE 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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial) <b>A. Virginia Foxx for Congress</b>		Transaction ID: 60314.E1016 Date of Disbursement 02 / 23 / 2006	
Mailing Address PO Box 1750		Amount of Each Disbursement this Period 2500.00	
City Blowing Rock State NC Zip Code 28605-1750	Purpose of Disbursement CONTRIBUTION	Category/ Type	
Candidate Name VIRGINIA FOXX	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: NC District: 05	CONTRIBUTION		

Full Name (Last, First, Middle Initial) <b>B. The National Republican Senatorial Commi</b>		Transaction ID: 60330.E1038 Date of Disbursement 03 / 28 / 2006	
Mailing Address Committee Ronald Reagan Republican Center		Amount of Each Disbursement this Period 15000.00	
City Washington State DC Zip Code 20002-	Purpose of Disbursement CONTRIBUTION	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:	Year 2006 CONTRIBUTION		

Full Name (Last, First, Middle Initial) <b>C. Talent for Senate</b>		Transaction ID: 60314.E1014 Date of Disbursement 02 / 22 / 2006	
Mailing Address 147 N Meramec Ave Ste 100		Amount of Each Disbursement this Period 5000.00	
City Saint Louis State MO Zip Code 63105-3767	Purpose of Disbursement CONTRIBUTION	Category/ Type	
Candidate Name JAMES MATTHES TALENT	Office Sought: <input type="checkbox"/> House <input checked="" 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: MO District: 00	CONTRIBUTION		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	22500.00
<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)

PAGE 34 / 34

<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)  
The Leadership Circle PAC

Full Name (Last, First, Middle Initial)

**A.** Talent for Senate

Mailing Address 147 N Meramec Ave Ste 100

City State Zip Code  
Saint Louis MO 63105-3767

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JAMES MATTHES TALENT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: MO District: 00

Transaction ID: 60314.E1013

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

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

27500.00