

# 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  
Dickstein Shapiro LLP PAC

ADDRESS (number and street) 1825 Eye Street, NW  
 Check if different than previously reported. (ACC)  
Washington DC 20006

2. **FEC IDENTIFICATION NUMBER** C00110197  
**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 06 08 2006 through 06 30 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 Mr. L. Andrew Zausner  
Signature of Treasurer Electronically Filed by Mr. L. Andrew Zausner Date 07 12 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  
Dickstein Shapiro LLP PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		78227.80
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	21063.24									
(c) Total Receipts (from Line 19) .....	4589.00	6989.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	25652.24	85216.80								
7. Total Disbursements (from Line 31) .....	14344.47	73909.03								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	11307.77	11307.77								
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) .....	0.60									

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  
Dickstein Shapiro LLP PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4366.00	6766.00
(i) Itemized (use Schedule A) .....	223.00	223.00
(ii) Unitemized .....	4589.00	6989.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	4589.00	6989.00
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)) .....	4589.00	6989.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4589.00	6989.00

**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.....	0.00	5000.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	5000.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	14344.47	68909.03
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))..	14344.47	73909.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	14344.47	73909.03

**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) .....	4589.00	6989.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4589.00	6989.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	5000.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	5000.00

**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 6 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)  
Dickstein Shapiro LLP PAC

Full Name (Last, First, Middle Initial) <b>A. Mr. Matt Bergman</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 2101 L Street NW		Transaction ID: SA11A1.6436
City Washington State DC Zip Code 20037	Amount of Each Receipt this Period 170.00	
FEC ID number of contributing federal political committee. <b>C</b>		Contribution
Name of Employer DSMO LLP Occupation Attorney	Aggregate Year-to-Date ▼ 340.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms Ida Draim</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 2101 L Street, NW		Transaction ID: SA11A1.6437
City Washington State DC Zip Code 20037	Amount of Each Receipt this Period 208.00	
FEC ID number of contributing federal political committee. <b>C</b>		Contribution
Name of Employer DSM&O, LLP Occupation Attorney	Aggregate Year-to-Date ▼ 208.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms Ida Draim</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 2101 L Street, NW		Transaction ID: SA11A1.6438
City Washington State DC Zip Code 20037	Amount of Each Receipt this Period 208.00	
FEC ID number of contributing federal political committee. <b>C</b>		Contribution
Name of Employer DSM&O, LLP Occupation Attorney	Aggregate Year-to-Date ▼ 416.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	586.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Leon Kellner		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 2101 L Street, NW		Transaction ID: SA11A1.6439	
City Washington	State DC	Zip Code 20037	Amount of Each Receipt this Period 1720.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer DSM&O, LLP	Occupation Attorney	Aggregate Year-to-Date ▼ 1720.00	
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 Scheer		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 2101 L Street, NW		Transaction ID: SA11A1.6444	
City Washington	State DC	Zip Code 20037	Amount of Each Receipt this Period 680.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer DSMO LLP	Occupation attorney	Aggregate Year-to-Date ▼ 680.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Laura Szabo		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 2101 L St. NW		Transaction ID: SA11A1.6440	
City Washington	State DC	Zip Code 20037	Amount of Each Receipt this Period 700.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer DSM&O	Occupation Attorney	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) ..... ▶	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 8 / 14	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steven Weinstein

Mailing Address 2101 L St., NW

City State Zip Code  
Washington DC 20037

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

Name of Employer Occupation  
DSM&O, LLP Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
680.00

Date of Receipt  

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

Transaction ID: SA11A1.6441

Amount of Each Receipt this Period  
680.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	680.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4366.00

**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)  
Dickstein Shapiro LLP PAC

Full Name (Last, First, Middle Initial) <b>A. BRAD MILLER FOR UNITED STATES CONGRESS</b>		<b>Transaction ID:</b> SB23.6456
Mailing Address P.O. Box 10322		Date of Disbursement MM / DD / YYYY 06 / 27 / 2006
City Raleigh	State NC	Amount of Each Disbursement this Period 1000.00
Zip Code 27605		
Purpose of Disbursement Contribution		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: NC	District: 13	

Full Name (Last, First, Middle Initial) <b>B. Dickstein Shapiro Morin &amp; Oshinsky LLP</b>		<b>Transaction ID:</b> SB23.6415
Mailing Address 2101 L Street, NW		Date of Disbursement MM / DD / YYYY 06 / 20 / 2006
City Washington	State DC	Amount of Each Disbursement this Period 15.16
Zip Code 20037		
Purpose of Disbursement In-Kind Contribution for refreshments		Category/ Type
Candidate Name PHYLLIS BUSANSKY FOR CONGRESS		
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: 09	

Full Name (Last, First, Middle Initial) <b>C. DOYLE FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.6457
Mailing Address 2227 Hampton Street		Date of Disbursement MM / DD / YYYY 06 / 28 / 2006
City Pittsburgh	State PA	Amount of Each Disbursement this Period 1000.00
Zip Code 15218		
Purpose of Disbursement Contribution		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: PA	District: 14	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2015.16</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 10 / 14

<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)  
Dickstein Shapiro LLP PAC

Full Name (Last, First, Middle Initial) <b>A. Equinox</b>		Transaction ID: SB23.6416	
Mailing Address 818 Connecticut Avenue, NW		Date of Disbursement 06 / 20 / 2006	
City Washington	State DC	Zip Code 20006	Amount of Each Disbursement this Period 750.00
Purpose of Disbursement In-Kind Contribution for food		Category/ Type	
Candidate Name PHYLLIS BUSANSKY FOR CONGRESS			
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: 09		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JOHN BOEHNER</b>		Transaction ID: SB23.6453	
Mailing Address 7908-I Cincinnati Dayton Road		Date of Disbursement 06 / 27 / 2006	
City West Chester	State OH	Zip Code 45069	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		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: OH	District: 08		

Full Name (Last, First, Middle Initial) <b>C. KEEP OUR MAJORITY PAC</b>		Transaction ID: SB23.6463	
Mailing Address PO Box 20209		Date of Disbursement 06 / 29 / 2006	
City Alexandria	State VA	Zip Code 22320	Amount of Each Disbursement this Period 1000.00
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2750.00</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 11 / 14

<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)  
Dickstein Shapiro LLP PAC

Full Name (Last, First, Middle Initial) <b>A. MIKE PENCE COMMITTEE</b>		<b>Transaction ID: SB23.6449</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6
Mailing Address P. O. Box 408		Amount of Each Disbursement this Period 1000.00
City Anderson State IN Zip Code 46015	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06	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. Nosegay Florist</b>		<b>Transaction ID: SB23.6414</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 1120 20th Street, NW		Amount of Each Disbursement this Period 79.31
City Washington State DC Zip Code 20036	Category/ Type	
Purpose of Disbursement In-Kind Contribution for flowers		
Candidate Name PHYLLIS BUSANSKY FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 09	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. PHYLLIS BUSANSKY FOR CONGRESS</b>		<b>Transaction ID: SB23.6466</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 3611 SCHEFFLERA ROAD		Amount of Each Disbursement this Period 1500.00
City TAMPA State FL Zip Code 33618	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 09	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2579.31
<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 12 / 14

<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)  
Dickstein Shapiro LLP PAC

Full Name (Last, First, Middle Initial) <b>A. SANTORUM 2006</b>		<b>Transaction ID: SB23.6410</b> Date of Disbursement
Mailing Address ONE TOWER BRIDGE SUITE 1440		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
City WEST CONSHOHOCKEN	State PA	Zip Code 19428
Purpose of Disbursement Contribution	<input type="text"/>	
Candidate Name	Category/ Type	
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) ▼	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
State: PA	District: 00	

Full Name (Last, First, Middle Initial) <b>B. SPRATT FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.6409</b> Date of Disbursement
Mailing Address PO BOX 830		<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>
City YORK	State SC	Zip Code 29745
Purpose of Disbursement Contribution	<input type="text"/>	
Candidate Name	Category/ Type	
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) ▼	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
State: SC	District: 05	

Full Name (Last, First, Middle Initial) <b>C. TENNESSEE SENATE 2006</b>		<b>Transaction ID: SB23.6460</b> Date of Disbursement
Mailing Address 120 MARYLAND AVENUE NE		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement Contribution	<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="2000.00"/>
State:	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5000.00"/>
<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 13 / 14

<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)  
Dickstein Shapiro LLP PAC

A. Full Name (Last, First, Middle Initial)  
TOM FEENEY FOR CONGRESS

Mailing Address 1420 Alafaya Trail #103

City Oviedo State FL Zip Code 32765

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: FL District: 24

Transaction ID: SB23.6413

Date of Disbursement

06 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
WHITFIELD FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 391

City HOPKINSVILLE State KY Zip Code 42241

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: KY District: 01

Transaction ID: SB23.6450

Date of Disbursement

06 / 25 / 2006

Amount of Each Disbursement this Period

1000.00

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

2000.00

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

14344.47

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 / 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Dickstein Shapiro Morin & Oshinsky, LLP	Nature of Debt (Purpose): Aministrative costs
Mailing Address 2101 L Street, NW	
City State ZIP Code Washington, DC 20037	

Outstanding Balance Beginning This Period <input type="text" value="-409.80"/>	<b>Transaction ID: SD10.102</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="-409.80"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Dickstein Shapiro Morin & Oshinsky, LLP	Nature of Debt (Purpose): Admin. Costs (fax, copy, rent, etc.)
Mailing Address 2101 L Street, NW	
City State ZIP Code Washington, DC 20037	

Outstanding Balance Beginning This Period <input type="text" value="410.40"/>	<b>Transaction ID: SD10.183</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="410.40"/>

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.60"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	<input type="text" value="0.60"/>
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>