



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Avaya Inc. 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	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">47653.40</td></tr></table>	47653.40
Y	Y	Y	Y									
2	0	0	6									
47653.40												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">47653.40</td></tr></table>	47653.40										
47653.40												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">9141.35</td></tr></table>	9141.35	<table border="1" style="width: 100%;"><tr><td align="right">9141.35</td></tr></table>	9141.35								
9141.35												
9141.35												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">56794.75</td></tr></table>	56794.75	<table border="1" style="width: 100%;"><tr><td align="right">56794.75</td></tr></table>	56794.75								
56794.75												
56794.75												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">12250.00</td></tr></table>	12250.00	<table border="1" style="width: 100%;"><tr><td align="right">12250.00</td></tr></table>	12250.00								
12250.00												
12250.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">44544.75</td></tr></table>	44544.75	<table border="1" style="width: 100%;"><tr><td align="right">44544.75</td></tr></table>	44544.75								
44544.75												
44544.75												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
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  
Avaya Inc. 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	2514.00	2514.00
(i) Itemized (use Schedule A) .....	6627.35	6627.35
(ii) Unitemized .....	9141.35	9141.35
(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) .....	9141.35	9141.35
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)) .....	9141.35	9141.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9141.35	9141.35

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
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.....	2250.00	2250.00
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))..	12250.00	12250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	12250.00	12250.00

**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) .....	9141.35	9141.35
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9141.35	9141.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
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	0.00

# 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 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Avaya Inc.</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address		<b>Transaction ID: R1994</b>
City State Zip Code	Amount of Each Receipt this Period 339.00	
FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1059.69	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Joel Brunson</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 6
Mailing Address 3761 Commerce Drive Suites 413-415		<b>Transaction ID: R1919</b>
City State Zip Code Baltimore MD 21227-1644	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction	
Name of Employer Occupation Avaya Inc. Manager	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Joel Brunson</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address 3761 Commerce Drive Suites 413-415		<b>Transaction ID: R1988</b>
City State Zip Code Baltimore MD 21227-1644	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction	
Name of Employer Occupation Avaya Inc. Manager	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	539.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (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 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Joel Brunson		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2006
Mailing Address 3761 Commerce Drive Suites 413-415		<b>Transaction ID:</b> R2062
City State Zip Code Baltimore MD 21227-1644	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Avaya Inc. Occupation Manager	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles E. Crowders		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2006
Mailing Address 7204 Quiet Cove		<b>Transaction ID:</b> R1891
City State Zip Code Annandale VA 22003	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Avaya Inc. Occupation VP, Government Affairs	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Charles E. Crowders		Date of Receipt M M / D D / Y Y Y Y 02 / 22 / 2006
Mailing Address 7204 Quiet Cove		<b>Transaction ID:</b> R1963
City State Zip Code Annandale VA 22003	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Avaya Inc. Occupation VP, Government Affairs	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Charles E. Crowders Mailing Address 7204 Quiet Cove City Annandale State VA Zip Code 22003 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2006 <b>Transaction ID: R2035</b> Amount of Each Receipt this Period 75.00 Payroll Deduction
Name of Employer Avaya Inc. Occupation VP, Government Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Michael Harrison Mailing Address 211 Mount Airy Road Room 3E130 City Basking Ridge State NJ Zip Code 07920-2311 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2006 <b>Transaction ID: R1876</b> Amount of Each Receipt this Period 75.00 Payroll Deduction
Name of Employer Avaya Inc. Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Michael Harrison Mailing Address 211 Mount Airy Road Room 3E130 City Basking Ridge State NJ Zip Code 07920-2311 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 22 / 2006 <b>Transaction ID: R1949</b> Amount of Each Receipt this Period 75.00 Payroll Deduction
Name of Employer Avaya Inc. Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	225.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael Harrison

Mailing Address 211 Mount Airy Road  
Room 3E130

City Basking Ridge State NJ Zip Code 07920-2311

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

Name of Employer Avaya Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 28 / 2006

**Transaction ID: R2018**

Amount of Each Receipt this Period  
75.00

Payroll Deduction

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter Hong

Mailing Address 211 Mount Airy Road  
1C111

City Basking Ridge State NJ Zip Code 07920-2311

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

Name of Employer Avaya Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 24 / 2006

**Transaction ID: R1922**

Amount of Each Receipt this Period  
75.00

Payroll Deduction

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peter Hong

Mailing Address 211 Mount Airy Road  
1C111

City Basking Ridge State NJ Zip Code 07920-2311

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

Name of Employer Avaya Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 22 / 2006

**Transaction ID: R1992**

Amount of Each Receipt this Period  
75.00

Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	225.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Peter Hong

Mailing Address 211 Mount Airy Road  
1C111

City Basking Ridge State NJ Zip Code 07920-2311

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

Name of Employer Avaya Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2006

**Transaction ID: R2064**

Amount of Each Receipt this Period  
75.00

Payroll Deduction

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

Mailing Address 211 Mount Airy Road  
Room 3W440

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer Avaya Inc. Occupation Senior Vice President - Sales & Market

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
01 / 24 / 2006

**Transaction ID: R1899**

Amount of Each Receipt this Period  
100.00

Payroll Deduction

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

Mailing Address 211 Mount Airy Road  
Room 3W440

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer Avaya Inc. Occupation Senior Vice President - Sales & Market

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2006

**Transaction ID: R1971**

Amount of Each Receipt this Period  
100.00

Payroll Deduction

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

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

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

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. David Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2006	
Mailing Address 211 Mount Airy Road Room 3W440		<b>Transaction ID: R2044</b>	
City Basking Ridge	State NJ	Zip Code 07920	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction	
Name of Employer Avaya Inc.	Occupation Senior Vice President - Sales & Market		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Kenneth L. Keefe</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2006	
Mailing Address 8252 Private Lane		<b>Transaction ID: R1881</b>	
City Annandale	State VA	Zip Code 22003	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction	
Name of Employer Avaya Inc.	Occupation Director, Government Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Kenneth L. Keefe</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 22 / 2006	
Mailing Address 8252 Private Lane		<b>Transaction ID: R1954</b>	
City Annandale	State VA	Zip Code 22003	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction	
Name of Employer Avaya Inc.	Occupation Director, Government Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

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

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

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

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth L. Keefe

Mailing Address 8252 Private Lane

City Annandale State VA Zip Code 22003

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

Name of Employer Avaya Inc. Occupation Director, Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2006

**Transaction ID: R2024**

Amount of Each Receipt this Period  
 100.00

Payroll Deduction

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mary Mondragon

Mailing Address 245 South Los Robles Avenue  
4th Floor

City Pasadena State CA Zip Code 91101-3638

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

Name of Employer Avaya Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 24 / 2006

**Transaction ID: R1882**

Amount of Each Receipt this Period  
 75.00

Payroll Deduction

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mary Mondragon

Mailing Address 245 South Los Robles Avenue  
4th Floor

City Pasadena State CA Zip Code 91101-3638

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

Name of Employer Avaya Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 24 / 2006

**Transaction ID: R1883**

Amount of Each Receipt this Period  
 75.00

Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mary Mondragon

Mailing Address 245 South Los Robles Avenue  
4th Floor

City Pasadena State CA Zip Code 91101-3638

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

Name of Employer Avaya Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2006

Transaction ID: R1955

Amount of Each Receipt this Period  
75.00

Payroll Deduction

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mary Mondragon

Mailing Address 245 South Los Robles Avenue  
4th Floor

City Pasadena State CA Zip Code 91101-3638

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

Name of Employer Avaya Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2006

Transaction ID: R2025

Amount of Each Receipt this Period  
75.00

Payroll Deduction

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael Thurk

Mailing Address 300 Baker Avenue  
Suite 100

City Concord State MA Zip Code 01742-2131

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

Name of Employer Avaya Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
01 / 24 / 2006

Transaction ID: R1914

Amount of Each Receipt this Period  
100.00

Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Michael Thurk		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address 300 Baker Avenue Suite 100		<b>Transaction ID:</b> R1984
City State Zip Code Concord MA 01742-2131	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Avaya Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael Thurk		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 6
Mailing Address 300 Baker Avenue Suite 100		<b>Transaction ID:</b> R2058
City State Zip Code Concord MA 01742-2131	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Avaya Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	2514.00

# 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 15 / 20

<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)  
Avaya Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. A Lot of People for Dave Obey</b>		Transaction ID: D207 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address P.O. Box 75214		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20013-5214	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name David R. Obey		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bob Etheridge for Congress Committee</b>		Transaction ID: D215 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6
Mailing Address 303 West Jones Street Suite 220 PO Box 28001		Amount of Each Disbursement this Period 500.00
City Raleigh State NC Zip Code 27611	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Bob Etheridge		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02	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. Brad Miller for Congress</b>		Transaction ID: D225 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6
Mailing Address 499 South Capitol Street, SW Suite 604		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Bradley Miller		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13	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) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 20

<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

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)  
Avaya Inc. PAC

<b>A. CPC</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 22614 City Alexandria State VA Zip Code 22304 Purpose of Disbursement Contr. Candidate Name Jim McCrery Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D209</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00 Category/Type
--	--	--

<b>B. Diana DeGette for Congress Inc</b> Full Name (Last, First, Middle Initial) Mailing Address 38 Ivey Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Contr. Candidate Name Diana DeGette Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 01 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D217</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6 Amount of Each Disbursement this Period 500.00 Category/Type
---	--	---

<b>C. Doyle for Congress</b> Full Name (Last, First, Middle Initial) Mailing Address 301 4th Street, NE Suite 202 City Washington State DC Zip Code 20002 Purpose of Disbursement Contr. Candidate Name Michael F. Doyle Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 14 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D219</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00 Category/Type
--	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<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 17 / 20

<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)  
Avaya Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Frelinghuysen for Congress Committee</b>		<b>Transaction ID: D216</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6
Mailing Address P.O. Box 29576		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20017	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Rodney P. Frelinghuysen		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 11	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Congressman Tim Holden</b>		<b>Transaction ID: D206</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address 729 15th Street, NW 3rd Floor		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20005	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Tim Holden		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	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. Friends of Sam Johnson</b>		<b>Transaction ID: D220</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6
Mailing Address PO Box 860096		Amount of Each Disbursement this Period 1000.00
City Plano State TX Zip Code 75086	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Samuel Robert Johnson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 03	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) ..... ▶	3000.00
<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 18 / 20

<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)  
Avaya Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Jd Hayworth for Congress</b>		<b>Transaction ID: D208</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address 14300 N. Northsight Blvd. #105		Amount of Each Disbursement this Period 1000.00
City State Zip Code Scottsdale AZ 85260	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name J.D. Hayworth		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jim Ramstad Volunteer Committee</b>		<b>Transaction ID: D218</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6
Mailing Address 1809 South Plymouth Road Suite 310B		Amount of Each Disbursement this Period 500.00
City State Zip Code Minnetonka MN 55305	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Jim M. Ramstad		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03	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. Mark Udall For Congress, Inc.</b>		<b>Transaction ID: D222</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6
Mailing Address 236 Massachusetts Avenue, NE Suite 508		Amount of Each Disbursement this Period 1000.00
City State Zip Code Washington DC 20002	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Mark Udall		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02	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) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	10000.00

# 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 19 / 20

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

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Brad Hill</b>		<b>Transaction ID: D212</b> Date of Disbursement MM / DD / YYYY 02 / 14 / 2006
Mailing Address P.O. Box 556		Amount of Each Disbursement this Period 250.00
City Ipswich State MA Zip Code 01938	Category/ Type	
Purpose of Disbursement Non-Federal Brad Hill (MA-BARN D-R)		
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. Councilman Cardenas Committee</b>		<b>Transaction ID: D228</b> Date of Disbursement MM / DD / YYYY 03 / 21 / 2006
Mailing Address c/o Charlotte Dobbs & Co. 2730 Wilshire Boulevard		Amount of Each Disbursement this Period 500.00
City Santa Monica State CA Zip Code 90403	Category/ Type	
Purpose of Disbursement Non-Federal Councilman Cardenas Commi		
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) ▼

(CA-D)

Full Name (Last, First, Middle Initial) <b>C. Holtzman for Governor</b>		<b>Transaction ID: D224</b> Date of Disbursement MM / DD / YYYY 03 / 13 / 2006
Mailing Address c/o Rachel Pearson 1331 H Street, NW, 12th Floor		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20005	Category/ Type	
Purpose of Disbursement Non-Federal Marc Holtzman (CO-R)		
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) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 20

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

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NAME OF COMMITTEE (In Full)  
Avaya Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Jennifer Ping for Marion County Auditor Committee</b>		<b>Transaction ID: D226</b>																					
Mailing Address 7964 Meadow Bend Circle		Date of Disbursement																					
City Indianapolis State IN Zip Code 46259		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	4		2	0	0	6														
Purpose of Disbursement Non-Federal Jennifer Ping (IN-R)		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">500.00</td> </tr> </table>		500.00																			
500.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) <b>B. No. VI Leadership Fund</b>		<b>Transaction ID: D229</b>																					
Mailing Address P.O. Box 14173		Date of Disbursement																					
City Lansing State MI Zip Code 48901		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	1		2	0	0	6														
Purpose of Disbursement Non-Federal Craig DeRoche (MI-R)		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">500.00</td> </tr> </table>		500.00																			
500.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>2250.00</b>