

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Team America PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		2021.81
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	2626.56									
(c) Total Receipts (from Line 19)	10059.17	18945.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12685.73	20966.83								
7. Total Disbursements (from Line 31)	6885.48	15166.58								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5800.25	5800.25								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	33097.45									

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
Team America PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	7

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	3800.00	6200.00
(i) Itemized (use Schedule A)	6118.50	12324.00
(ii) Unitemized	9918.50	18524.00
(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)	9918.50	18524.00
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.)	140.67	421.02
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))	10059.17	18945.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10059.17	18945.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	6885.48	15166.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6885.48	15166.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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))..	6885.48	15166.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	6885.48	15166.58

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)	9918.50	18524.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9918.50	18524.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6885.48	15166.58
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6885.48	15166.58

**SCHEDULE A (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"/> 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)
Team America PAC

A. Full Name (Last, First, Middle Initial) Henry Buhl Mailing Address 114 Greene St City New York State NY Zip Code 10012-3829 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Transaction ID: 70315.C39454 Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Brian Corbin Mailing Address PO Box 736 City Centreville State VA Zip Code 20122-0736 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 7 Transaction ID: 70215.C39113 Amount of Each Receipt this Period 200.00 Receipt
Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) Steve Cullen Mailing Address 1632 Surrey Ct. City Walnut Creek State CA Zip Code 94598 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 5 / 2 0 0 7 Transaction ID: 70320.C39485 Amount of Each Receipt this Period 200.00 Receipt
Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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)
Team America PAC

A. Full Name (Last, First, Middle Initial)
Kelly Grant

Mailing Address 16 Forest Green Dr

City Springfield State IL Zip Code 62707-8026

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

Name of Employer Mel-O-Cream Occupation president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2007

Transaction ID: 70315.C39399

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Mr. and Mrs. Keaveny

Mailing Address 309 Lunar Ln.

City Bismarck State ND Zip Code 58503-0469

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

Name of Employer self Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 08 / 2007

Transaction ID: 70215.C39061

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 7350 Wakefield Ave

City Reedley State CA Zip Code 93654-9405

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

Name of Employer Kencarol Inc Occupation Farm Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2007

Transaction ID: 70315.C39389

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1700.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 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)
Team America PAC

A. Full Name (Last, First, Middle Initial) Philip Mueller		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 8 / 2 0 0 7	
Mailing Address 3919 Iron Mill Lane		Transaction ID: 70320.C39483	
City State Zip Code San Antonio TX 78230	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Occupation none Retired	Aggregate Year-to-Date ▼ 200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ray Oden		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7	
Mailing Address 702 Thora Blvd		Transaction ID: 70315.C39414	
City State Zip Code Shreveport LA 71106-1824	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Occupation N/A Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	3800.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Team America PAC

Full Name (Last, First, Middle Initial) A. Corporate Payroll Services		Transaction ID: 70315.E2505 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 7
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 31.90
City Rockville State MD Zip Code 20850-6108	PAYROLL SERVICE FEE	
Purpose of Disbursement Payroll service fee Candidate Name		001 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. Corporate Payroll Services		Transaction ID: 70315.E2506 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 7
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 237.98
City Rockville State MD Zip Code 20850-6108	FED/STATE WITHHOLDING	
Purpose of Disbursement fed/state withholding Candidate Name		001 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) C. Corporate Payroll Services		Transaction ID: 70315.E2508 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 7
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 243.87
City Rockville State MD Zip Code 20850-6108	FED/STATE WITHHOLDING	
Purpose of Disbursement fed/state withholding Candidate Name		001 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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	513.75
TOTAL 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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Corporate Payroll Services		Transaction ID: 70315.E2507 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 7
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 31.90
City Rockville State MD Zip Code 20850-6108	PAYROLL SERVICES FEE	
Purpose of Disbursement Payroll services fee Candidate Name		001 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. Corporate Payroll Services		Transaction ID: 70320.E2515 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 31.90
City Rockville State MD Zip Code 20850-6108	PAYROLL SERVICES	
Purpose of Disbursement Payroll services Candidate Name		001 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) C. Corporate Payroll Services		Transaction ID: 70320.E2516 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7
Mailing Address 1803 Research Blvd Ste 300		Amount of Each Disbursement this Period 245.80
City Rockville State MD Zip Code 20850-6108	FED/STATE/WITHHOLDING	
Purpose of Disbursement fed/state/withholding Candidate Name		001 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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	309.60
TOTAL 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 11 / 20

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

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NAME OF COMMITTEE (In Full)
Team America PAC

Full Name (Last, First, Middle Initial) A. C&E Printing, Inc.		Transaction ID: 70315.E2503 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 446 Maple Ave., East		Amount of Each Disbursement this Period 1686.25
City Vienna State VA Zip Code 22180-	PRINTING NON-CAND-SPEC	
Purpose of Disbursement printing non-cand-spec Candidate Name		001 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. Aristotle		Transaction ID: 70315.E2502 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1200.00
City Washington State DC Zip Code 20003-1164	-DEBT PAYT-COMPLIANCE	
Purpose of Disbursement -debt payt-compliance Candidate Name		001 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) C. BB & T		Transaction ID: 70320.E2520 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 7
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 57.80
City Vienna State VA Zip Code 22180-4723	CREDIT CARD FEES	
Purpose of Disbursement Credit card fees Candidate Name		001 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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2944.05
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 20

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

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NAME OF COMMITTEE (In Full)
Team America PAC

A. BB & T Full Name (Last, First, Middle Initial) Mailing Address 440 Maple Ave E City Vienna State VA Zip Code 22180-4723 Purpose of Disbursement Credit card fees Candidate Name		Transaction ID: 70320.E2521 Date of Disbursement 02 / 01 / 2007 Amount of Each Disbursement this Period 8.00 001 Category/ Type CREDIT CARD FEES
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. BB & T Full Name (Last, First, Middle Initial) Mailing Address 440 Maple Ave E City Vienna State VA Zip Code 22180-4723 Purpose of Disbursement Credit card fees Candidate Name		Transaction ID: 70320.E2522 Date of Disbursement 02 / 06 / 2007 Amount of Each Disbursement this Period 4.50 001 Category/ Type CREDIT CARD FEES
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) ▼	

C. BB & T Full Name (Last, First, Middle Initial) Mailing Address 440 Maple Ave E City Vienna State VA Zip Code 22180-4723 Purpose of Disbursement check charge Candidate Name		Transaction ID: 70320.E2527 Date of Disbursement 02 / 07 / 2007 Amount of Each Disbursement this Period 34.66 001 Category/ Type CHECK CHARGE
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

47.16

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Team America PAC

Full Name (Last, First, Middle Initial) A. BB & T		Transaction ID: 70320.E2523 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 39.48
City Vienna State VA Zip Code 22180-4723	CREDIT CARD FEES	
Purpose of Disbursement Credit card fees		001 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. BB & T		Transaction ID: 70320.E2528 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 7
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 50.87
City Vienna State VA Zip Code 22180-4723	SERVICE CHARGE	
Purpose of Disbursement Service Charge		001 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) C. BB & T		Transaction ID: 70320.E2524 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 7
Mailing Address 440 Maple Ave E		Amount of Each Disbursement this Period 15.56
City Vienna State VA Zip Code 22180-4723	BANK SERVICE CHARGES	
Purpose of Disbursement Bank service charges		001 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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	105.91
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Team America PAC

A. BB & T Full Name (Last, First, Middle Initial) Mailing Address 440 Maple Ave E City Vienna State VA Zip Code 22180-4723		Transaction ID: 70320.E2525 Date of Disbursement: MM / DD / YYYY 02 / 22 / 2007
Purpose of Disbursement Credit card fees Candidate Name		Amount of Each Disbursement this Period 15.85
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 FEES

B. BB & T Full Name (Last, First, Middle Initial) Mailing Address 440 Maple Ave E City Vienna State VA Zip Code 22180-4723		Transaction ID: 70320.E2526 Date of Disbursement: MM / DD / YYYY 02 / 22 / 2007
Purpose of Disbursement Credit card fees Candidate Name		Amount of Each Disbursement this Period 15.00
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 FEES

C. Angela Buchanan Full Name (Last, First, Middle Initial) Mailing Address 11321 Hunt Farm Ln. City Oakton State VA Zip Code 22124-		Transaction ID: 70315.E2509 Date of Disbursement: MM / DD / YYYY 02 / 01 / 2007
Purpose of Disbursement - Payroll Candidate Name		Amount of Each Disbursement this Period 0.00
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) ▼	- PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶	30.85
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Team America PAC

A. Angela Buchanan Full Name (Last, First, Middle Initial) Mailing Address 11321 Hunt Farm Ln. City Oakton State VA Zip Code 22124- Purpose of Disbursement - Payroll 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) ▼		Transaction ID: 70315.E2510 Date of Disbursement MM / DD / YYYY 02 / 14 / 2007 Amount of Each Disbursement this Period 0.00 - PAYROLL
--	--	--

B. Marcus Epstein Full Name (Last, First, Middle Initial) Mailing Address 2800 Woodley Rd NW Apt 238 City Washington State DC Zip Code 20008- Purpose of Disbursement Payroll 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) ▼		Transaction ID: 70315.E2511 Date of Disbursement MM / DD / YYYY 02 / 01 / 2007 Amount of Each Disbursement this Period 586.42 PAYROLL
--	--	--

C. Marcus Epstein Full Name (Last, First, Middle Initial) Mailing Address 2800 Woodley Rd NW Apt 238 City Washington State DC Zip Code 20008- Purpose of Disbursement Payroll 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) ▼		Transaction ID: 70315.E2512 Date of Disbursement MM / DD / YYYY 02 / 14 / 2007 Amount of Each Disbursement this Period 586.41 PAYROLL
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SUBTOTAL of Disbursements This Page (optional) ▶	1172.83
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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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)
Team America PAC

Full Name (Last, First, Middle Initial) A. Marcus Epstein		Transaction ID: 70315.E2500 Date of Disbursement MM / DD / YYYY 02 / 16 / 2007	
Mailing Address 2800 Woodley Rd NW Apt 238		Amount of Each Disbursement this Period 94.49	
City Washington	State DC	Zip Code 20008-	REIMBURSEMENT-OFFICE
Purpose of Disbursement Reimbursement-office		001 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Marcus Epstein		Transaction ID: 70320.E2517 Date of Disbursement MM / DD / YYYY 02 / 26 / 2007	
Mailing Address 2800 Woodley Rd NW Apt 238		Amount of Each Disbursement this Period 586.41	
City Washington	State DC	Zip Code 20008-	PAYROLL
Purpose of Disbursement Payroll		001 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Falcon Printing		Transaction ID: 70315.E2501 Date of Disbursement MM / DD / YYYY 02 / 28 / 2007	
Mailing Address 1921 Gallows Rd		Amount of Each Disbursement this Period 0.00	
City Vienna	State VA	Zip Code 22182-3900	DEBT PAYT-NON-CAND-SPEC PRTG
Purpose of Disbursement debt payt-non-cand-spec prtg		003 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	680.90
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Team America PAC

Full Name (Last, First, Middle Initial) A. Christine Meyer		Transaction ID: 70315.E2513 Date of Disbursement MM / DD / YYYY 02 / 01 / 2007	
Mailing Address PO Box 1485		Amount of Each Disbursement this Period 55.41	
City Great Falls	State VA	Zip Code 22066-	PAYROLL
Purpose of Disbursement Payroll		001 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. Christine Meyer		Transaction ID: 70315.E2514 Date of Disbursement MM / DD / YYYY 02 / 14 / 2007	
Mailing Address PO Box 1485		Amount of Each Disbursement this Period 88.66	
City Great Falls	State VA	Zip Code 22066-	PAYROLL
Purpose of Disbursement Payroll		001 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) C. Christine Meyer		Transaction ID: 70320.E2518 Date of Disbursement MM / DD / YYYY 02 / 26 / 2007	
Mailing Address PO Box 1485		Amount of Each Disbursement this Period 99.73	
City Great Falls	State VA	Zip Code 22066-	PAYROLL
Purpose of Disbursement Payroll		001 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) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	243.80
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Team America PAC

Full Name (Last, First, Middle Initial) A. P. Daniel Orlich		Transaction ID: 70315.E2499 Date of Disbursement 02 / 06 / 2007	
Mailing Address 107 East St NE		Amount of Each Disbursement this Period 580.00	
City Vienna State VA Zip Code 22180-3615	Purpose of Disbursement rent	Category/Type 001	
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) ▼	RENT	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: 70315.E2504 Date of Disbursement 02 / 20 / 2007	
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 158.61	
City Tucson State AZ Zip Code 85731-7120	Purpose of Disbursement phone	Category/Type 001	
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) ▼	PHONE	

SUBTOTAL of Disbursements This Page (optional)	738.61
TOTAL This Period (last page this line number only)	6787.46

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 19 / 20 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)
Team America PAC

Transaction ID: LS60125.C27023

LOAN SOURCE Full Name (Last, First, Middle Initial) Jennie Baadsgaard	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1215 W 900 S DNM	
City Spanish Fork State UT ZIP Code 84660-9270	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4914.50	0.00	4914.50

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 2 D D 2 0 Y Y Y Y 2 0 0 5	20051220	.1000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional) ▶	<input style="width: 100%;" type="text" value="4914.50"/>
TOTALS This Period (last page in this line only) ▶	<input style="width: 100%;" type="text" value="4914.50"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 / 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Team America PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle	Nature of Debt (Purpose): 001-debt payt-compliance
Mailing Address 205 Pennsylvania Ave SE	
City State ZIP Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 1200.00	Transaction ID: LS70315.E2502	
Amount Incurred This Period 0.00	Payment This Period 1200.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Falcon Printing	Nature of Debt (Purpose): 003 debt payt-non-cand-spec prtg
Mailing Address 1921 Gallows Rd	
City State ZIP Code Vienna VA 22182-3900	

Outstanding Balance Beginning This Period 23681.29	Transaction ID: LS70315.E2501	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23681.29

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southwest Publishing	Nature of Debt (Purpose): 003 Fundraising Expense
Mailing Address 2600 NW Topeka Blvd	
City State ZIP Code Topeka KS 66617-1160	

Outstanding Balance Beginning This Period 4501.66	Transaction ID: LS50719.E1281	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4501.66

1) SUBTOTALS This Period This Page (optional).....	▶	28182.95
2) TOTALS This Period (last page this line number only).....	▶	28182.95
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	