

# 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  
MasterCard International Inc. Employees' PAC

ADDRESS (number and street) 2000 Purchase St.  
 Check if different than previously reported. (ACC)  
Purchase NY 10577

2. **FEC IDENTIFICATION NUMBER** C00410274  
**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 (12S)  
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 02 01 2011 through 02 28 2011

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 Althea Hutchinson

Signature of Treasurer Electronically Filed by Althea Hutchinson Date 03 16 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
MasterCard International Inc. Employees' PAC

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	Y	Y	Y	Y	2	0	1	1		111572.07
Y	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	116696.41									
(c) Total Receipts (from Line 19) .....	9788.50	16933.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	126484.91	128505.57								
7. Total Disbursements (from Line 31) .....	15330.66	17351.32								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	111154.25	111154.25								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

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		
(i) Itemized (use Schedule A) .....	7536.00	11054.00
(ii) Unitemized .....	2252.50	5848.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9788.50	16902.00
(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) .....	9788.50	16902.00
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	31.50
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)) .....	9788.50	16933.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9788.50	16933.50

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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.....	30.66	51.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	30.66	51.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15300.00	17300.00
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))..	15330.66	17351.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15330.66	17351.32

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	9788.50	16902.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9788.50	16902.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30.66	51.32
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	30.66	51.32

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 17  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial) Colm Dobbyn		Date of Receipt MM / DD / YYYY 02 / 15 / 2011
Mailing Address 2000 Purchase St		<b>Transaction ID:</b> 20110211-18-15-23
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer MasterCard	Occupation SVP/Asst. General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Tucker Foote		Date of Receipt MM / DD / YYYY 02 / 22 / 2011
Mailing Address 1401 I St NW Ste 2		<b>Transaction ID:</b> 2F42C4504A13FBA082F
City Washington	State DC	Zip Code 20005-2225
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer MasterCard	Occupation Business Leader, Public Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Thomas Gannon		Date of Receipt MM / DD / YYYY 02 / 15 / 2011
Mailing Address 1401 I St NW Ste 2		<b>Transaction ID:</b> 20110211-67-15-23
City Washington	State DC	Zip Code 20005-2225
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 115.00
Name of Employer MasterCard	Occupation Business Leader, Public Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>365.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 17  
(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)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)  
Maria Haluska

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Leader, Shareholder Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 02 / 15 / 2011  
Transaction ID: 20110211-25-15-23  
Amount of Each Receipt this Period: 125.00

**B.**

Full Name (Last, First, Middle Initial)  
Dora Hanft

Mailing Address 670 W End Ave

City New York State NY Zip Code 10025-7313

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

Name of Employer Occupation Spouse of Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt: 02 / 22 / 2011  
Transaction ID: 4EEA9455B2547112B81  
Amount of Each Receipt this Period: 208.00

**C.**

Full Name (Last, First, Middle Initial)  
Noah Hanft

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt: 02 / 15 / 2011  
Transaction ID: 20110211-12-15-23  
Amount of Each Receipt this Period: 416.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **749.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Justin Howe	Date of Receipt MM / DD / YYYY 02 / 15 / 2011
	Mailing Address 2000 Purchase St	<b>Transaction ID:</b> 20110211-45-15-23
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 167.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer MasterCard Occupation Finance Leader, Financial Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joan Kelly	Date of Receipt MM / DD / YYYY 02 / 15 / 2011
	Mailing Address 2200 Mastercard Blvd	<b>Transaction ID:</b> 20110211-2-15-23
	City O Fallon State MO Zip Code 63368-7263	Amount of Each Receipt this Period 290.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer MasterCard Occupation SVP/Systems Enhancement Stratg		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 580.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Manchisi	Date of Receipt MM / DD / YYYY 02 / 15 / 2011
	Mailing Address 2200 Mastercard Blvd	<b>Transaction ID:</b> 20110211-15-15-23
	City O Fallon State MO Zip Code 63368-7263	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer MasterCard Occupation SVP/Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 832.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>873.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 17  
(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)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial) Chris McWilton		Date of Receipt MM / DD / YYYY 02 / 15 / 2011
Mailing Address 2000 Purchase St		<b>Transaction ID:</b> 20110211-43-15-23
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
Name of Employer MasterCard	Occupation Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 832.00	

**B.**

Full Name (Last, First, Middle Initial) Timothy Murphy		Date of Receipt MM / DD / YYYY 02 / 15 / 2011
Mailing Address 2000 Purchase St		<b>Transaction ID:</b> 20110211-29-15-23
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
Name of Employer MasterCard	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 832.00	

**C.**

Full Name (Last, First, Middle Initial) Patrick O'Sullivan		Date of Receipt MM / DD / YYYY 02 / 15 / 2011
Mailing Address 2000 Purchase St		<b>Transaction ID:</b> 20110211-14-15-23
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation VP/Financial Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	956.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 17  
(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)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)  
Bob Reany

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Information Tech

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 02 / 15 / 2011  
**Transaction ID:** 20110211-8-15-23  
 Amount of Each Receipt this Period: 110.00

**B.**

Full Name (Last, First, Middle Initial)  
Rob Reeg

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt: 02 / 15 / 2011  
**Transaction ID:** 20110211-7-15-23  
 Amount of Each Receipt this Period: 416.00

**C.**

Full Name (Last, First, Middle Initial)  
Edgar Smart

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt: 02 / 15 / 2011  
**Transaction ID:** 20110211-27-15-23  
 Amount of Each Receipt this Period: 124.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 650.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 17  
(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)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Swezey

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

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

**Transaction ID:** 20110211-31-15-23

Amount of Each Receipt this Period  
 124.00

**B.**

Full Name (Last, First, Middle Initial)  
Donna Terman

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Bus Resources-Communication

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

**Transaction ID:** 20110211-28-15-23

Amount of Each Receipt this Period  
 150.00

**C.**

Full Name (Last, First, Middle Initial)  
Frank Tufano

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Head Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

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

**Transaction ID:** 20110211-50-15-23

Amount of Each Receipt this Period  
 290.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **564.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 17  
(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)  
MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial) Jeroen Van Erven		Date of Receipt MM / DD / YYYY 02 / 15 / 2011
Mailing Address 801 Brickell Ave Ste 130		<b>Transaction ID:</b> 20110211-35-15-23
City Miami	State FL	Zip Code 33131-2951
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer MasterCard	Occupation VP/Financial Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Denise Walker		Date of Receipt MM / DD / YYYY 02 / 17 / 2011
Mailing Address 2000 Purchase St		<b>Transaction ID:</b> C665807F1A0130A607F
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 3000.00
Name of Employer MasterCard	Occupation Global Practice Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

**C.**

Full Name (Last, First, Middle Initial) Mimi Wood		Date of Receipt MM / DD / YYYY 02 / 15 / 2011
Mailing Address 2000 Purchase St		<b>Transaction ID:</b> 20110211-38-15-23
City Purchase	State NY	Zip Code 10577-2405
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 124.00
Name of Employer MasterCard	Occupation VP/Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3249.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 17  
(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)  
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)  
Kent Young

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
O Fallon MO 63368-7263

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

Name of Employer Occupation  
MasterCard VP/Business Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

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

Transaction ID: 20110211-37-15-23

Amount of Each Receipt this Period  
130.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	130.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	7536.00

# 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 / 17

<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)  
MasterCard International Inc. Employees' PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Growth and Prosperity Political Action Committee <hr/> Mailing Address 831 Linwood Court <hr/> City Birmingham State AL Zip Code 35222 <hr/> Purpose of Disbursement 2011 Contribution Candidate Name Growth and Prosperity Political Action Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution <hr/> State: District:	Transaction ID: 6C50EAA139904CABA2A Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin McCarthy for Congress <hr/> Mailing Address PO Box 12667 <hr/> City Bakersfield State CA Zip Code 93389 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Kevin McCarthy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution <hr/> State: CA District: 22	Transaction ID: 9A893E77F750D8F937E Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) McCaskill for Missouri 2012 <hr/> Mailing Address 700 13th Street NW Suite 600 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Claire McCaskill <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution <hr/> State: MO District:	Transaction ID: F80D47885F71AFFBC3A Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution

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

11000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MasterCard International Inc. Employees' PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Montanans for Tester <hr/> Mailing Address PO Box 1135 <hr/> City Helena State MT Zip Code 59624 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Jon Tester <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 41E0DD69503B71FA097 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Montanans for Tester <hr/> Mailing Address PO Box 1135 <hr/> City Helena State MT Zip Code 59624 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Jon Tester <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 116E92F4CBC5C6E3528 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Hurt for Congress <hr/> Mailing Address PO Box 2 <hr/> City Chatham State VA Zip Code 24531 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Robert Hurt <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E1AC5B4DA9F2F1497C1 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 17 / 17

<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)  
MasterCard International Inc. Employees' PAC

<b>A.</b> Full Name (Last, First, Middle Initial) The Oorbeek Group <hr/> Mailing Address 2101 Wilson Blvd. Suite 610 <hr/> City Arlington State VA Zip Code 22201 <hr/> Purpose of Disbursement In-kind Contribution Jordan P2012 Candidate Name James Jordan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 04 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V4C8C4FA1BEB1A338FA Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 650.00 In-Kind
<b>B.</b> Full Name (Last, First, Middle Initial) The Oorbeek Group <hr/> Mailing Address 2101 Wilson Blvd. Suite 610 <hr/> City Arlington State VA Zip Code 22201 <hr/> Purpose of Disbursement In-kind Contribution Chaffetz P2012 Candidate Name Jason Chaffetz <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 03 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V5A229F6BEE673936717 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 650.00 In-Kind

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

1300.00

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

15300.00