

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 Hill PAC

ADDRESS (number and street) 1717 K Street, NW #309B Washington DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00363994 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 11 28 2006 through 12 31 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Janice Enright

Signature of Treasurer Electronically Filed by Janice Enright Date 01 31 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Hill PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

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		71555.80
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	67523.71									
(c) Total Receipts (from Line 19) .....	132805.92	1671580.25								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	200329.63	1743136.05								
7. Total Disbursements (from Line 31) .....	169324.08	1712130.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	31005.55	31005.55								
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) .....	16036.55									

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  
Hill PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

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	109500.00	1428164.00
(i) Itemized (use Schedule A) .....	245.00	12732.83
(ii) Unitemized .....	109745.00	1440896.83
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	23000.00	200797.26
(c) Other Political Committees (such as PACs) .....	132745.00	1641694.09
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	60.92	7380.78
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	22505.38
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)) .....	132805.92	1671580.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	132805.92	1671580.25

**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.....	169324.08	1221925.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	169324.08	1221925.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	414500.00
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	13305.00
(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	13305.00
29. Other Disbursements.....	0.00	62399.99
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))..	169324.08	1712130.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	169324.08	1712130.50

**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 .....	132745.00	1641694.09
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	13305.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	132745.00	1628389.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	169324.08	1221925.51
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	60.92	7380.78
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	169263.16	1214544.73

**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 / 68
	<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Karen Adler</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6	
Mailing Address 115 Central Park West Apartment 6-B		<b>Transaction ID: C60336</b>	
City State Zip Code New York NY 10023-4153		Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bromer Management LLC Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. Shahara Ahmad-Llewellyn</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 6	
Mailing Address 300 Central Park West Apartment 17D		<b>Transaction ID: C60329</b>	
City State Zip Code New York NY 10024		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Philadelphia Coca Cola Bottling Co. Business Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Christopher Barley</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 6	
Mailing Address 39 West 10th Street		<b>Transaction ID: C60349</b>	
City State Zip Code New York NY 10011		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	11500.00
<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 / 68
	<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Donald W. Carson</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6
Mailing Address 1 North Clements Street Suite 200		<b>Transaction ID: C60327</b>
City State Zip Code West Palm Beach FL 33401	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Florida Crystals Corporation	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Timothy C. Collins</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 6
Mailing Address 384 New Rochelle Road		<b>Transaction ID: C60318</b>
City State Zip Code Bronxville NY 10708-4413	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ripplewood Holdings	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Betty Cotton</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 86 Sheldrake Road		<b>Transaction ID: C60325</b>
City State Zip Code Scarsdale NY 10583	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Management Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<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 / 68
	<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Douglas S. Eakeley</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 6	
Mailing Address 75 South Terrace		<b>Transaction ID: C60343</b>	
City State Zip Code Short Hills NJ 07078-2213	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lowenstein Sandler	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Edith B. Everett</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 6	
Mailing Address 150 East 69th Street		<b>Transaction ID: C60331</b>	
City State Zip Code New York NY 10021-5766	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ryan Beck & Co.	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C. Sim Farar</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 6	
Mailing Address 914 Westwood Boulevard Suite 809		<b>Transaction ID: C60321</b>	
City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Trifer Investments	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 68
	<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Akbar Ghahary</b>		Date of Receipt MM / DD / YYYY 11 / 28 / 2006
Mailing Address 800 Palisade Avenue		<b>Transaction ID: C60319</b>
City Fort Lee	State NJ	Zip Code 07024
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 5000.00	
Name of Employer Safas Corporation	Occupation Chairman/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Sedi Ghahary</b>		Date of Receipt MM / DD / YYYY 11 / 28 / 2006
Mailing Address 800 Palisade Avenue		<b>Transaction ID: C60320</b>
City Fort Lee	State NJ	Zip Code 07024
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1500.00	
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Robert F. Green</b>		Date of Receipt MM / DD / YYYY 12 / 11 / 2006
Mailing Address 3001 Gilbert Street		<b>Transaction ID: C60330</b>
City Austin	State TX	Zip Code 78703
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
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 ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7500.00
<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 / 68
	<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Vinod Gupta</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 6
Mailing Address Post Office Box 27395 9917 Fieldcrest Drive		<b>Transaction ID: C60342</b>
City State Zip Code Omaha NE 68127-0395	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Everest Investment Management	Occupation Investment Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Doreen Hermelin</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 6
Mailing Address 31500 Bingham Road		<b>Transaction ID: C60339</b>
City State Zip Code Franklin MI 48025	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Seema Hingorani</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 4 Nutmeg Lane		<b>Transaction ID: C60332</b>
City State Zip Code Darien CT 06820	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pyramis Global Advisors	Occupation Director, Equity Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	11000.00
<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 / 68
	<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Marvin Israelow</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address 835 Hardscrabble Road		<b>Transaction ID: C60323</b>	
City State Zip Code Chappaqua NY 10514-3011		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Deborah Larkin</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6	
Mailing Address 237 Loring Avenue		<b>Transaction ID: C60333</b>	
City State Zip Code Pelham NY 10803		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Bari J. Mattes</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6	
Mailing Address 682 Broadway Number 10		<b>Transaction ID: C60334</b>	
City State Zip Code New York NY 10012		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Philanthropist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 68
	<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Va Maughan		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 6
Mailing Address 730 Park Avenue		<b>Transaction ID:</b> C60354
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer N/A Occupation Homemaker	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Heidi G. Miller		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 6
Mailing Address 12 Grahampton Lane		<b>Transaction ID:</b> C60322
City State Zip Code Greenwich CT 06830	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer JPMorganChase Occupation Banker	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Brooke Garber Neidich		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 120 East End Avenue Apartment 7A		<b>Transaction ID:</b> C60337
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer N/A Occupation Homemaker	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 68
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Thomas M. O'Gara</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address 112 Ranch Lane		<b>Transaction ID: C60324</b>	
City State Zip Code Bellevue ID 83313	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer O'Gara Company	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Sharon L. Patrick</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 6	
Mailing Address 119 East 84th Street Penthouse		<b>Transaction ID: C60328</b>	
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Martha Stewart Living Omnimedia	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Jessica Seinfeld</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6	
Mailing Address 211 Central Park West Apartment 19F		<b>Transaction ID: C60338</b>	
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Philanthropist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 68
	<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Jonathan Sheffer</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 9 / 2 0 0 6	
Mailing Address 39 West 10th Street		<b>Transaction ID: C60345</b>	
City State Zip Code New York NY 10011	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Conductor/Composer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Robert Siegfried</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 9 / 2 0 0 6	
Mailing Address 530 East 86th Street Apartment 11-B		<b>Transaction ID: C60346</b>	
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Kekst and Company Occupation Public Relations Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Martin F. Statfeld</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 6	
Mailing Address 14 North Hillside Avenue		<b>Transaction ID: C60335</b>	
City State Zip Code Livingston NJ 07039	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Statfeld Vantage Occupation Principal			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 68  
(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)  
Hill PAC

A. Full Name (Last, First, Middle Initial)  
Perry Weitz

Mailing Address 1 Sydney Road

City	State	Zip Code
Huntington Bay	NY	11743

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

Name of Employer  
Weitz & Luxenberg PC

Occupation  
Founding Partner

Receipt For:

Primary     General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	6

Transaction ID: C60344

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	109500.00

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

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

FOR LINE NUMBER: PAGE 16 / 68  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Hill PAC

**A.** Full Name (Last, First, Middle Initial)  
AFL-CIO COPE Political Contributions Committee

Mailing Address 815 16th Street, N.W.

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00003806

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 2 1 / 2 0 0 6

**Transaction ID:** C60352

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Direct Voice PAC of the Direct Marketing Assn.

Mailing Address 1111 19th Street, N.W.  
Suite 1100

City State Zip Code  
Washington DC 20036-3603

FEC ID number of contributing federal political committee. **C** C00235309

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 6

**Transaction ID:** C60355

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
Ironworkers Political Action League

Mailing Address 1750 New York Avenue, N.W.  
Suite 400

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 1 8 / 2 0 0 6

**Transaction ID:** C60347

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10500.00

**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 17 / 68  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Hill PAC

**A.** Full Name (Last, First, Middle Initial)  
National Air Traffic Controllers Assn. PAC

Mailing Address 1325 Massachusetts Avenue, N.W.

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 5 / 2 0 0 6

**Transaction ID:** C60326

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Service Employees International Union COPE

Mailing Address 1800 Massachusetts Avenue, N.W.

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 2 / 2 0 0 6

**Transaction ID:** C60353

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1301 K Street, N.W.  
Suite 600, East Tower

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00216127

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 9 / 2 0 0 6

**Transaction ID:** C60356

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	23000.00

# 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 18 / 68

<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Huma Abedin</b>		<b>Transaction ID: D7317</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 2020 12th Street, N.W. Apartment 709		Amount of Each Disbursement this Period 1495.77
City Washington State DC Zip Code 20009	001 Category/ Type	
Purpose of Disbursement Wages 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. Huma Abedin</b>		<b>Transaction ID: D7318</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 2020 12th Street, N.W. Apartment 709		Amount of Each Disbursement this Period 819.33
City Washington State DC Zip Code 20009	001 Category/ Type	
Purpose of Disbursement Wages Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Huma Abedin</b>		<b>Transaction ID: D7319</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 2020 12th Street, N.W. Apartment 709		Amount of Each Disbursement this Period 2605.48
City Washington State DC Zip Code 20009	001 Category/ Type	
Purpose of Disbursement Wages 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) ..... ▶	4920.58
<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 19 / 68

<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID: D7299</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address Post Office Box 53852		Amount of Each Disbursement this Period 1462.00
City Phoenix State AZ Zip Code 85072-3852	001 Category/Type	
Purpose of Disbursement Credit Card Process Fee 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. American Express</b>		<b>Transaction ID: D7300</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address Post Office Box 53852		Amount of Each Disbursement this Period 1428.00
City Phoenix State AZ Zip Code 85072-3852	001 Category/Type	
Purpose of Disbursement Credit Card Process Fee Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Samir Arora</b>		<b>Transaction ID: D7346</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1601 18th Street, N.W. Apartment 1007		Amount of Each Disbursement this Period 308.29
City Washington State DC Zip Code 20009	001 Category/Type	
Purpose of Disbursement Wages 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) ..... ▶	3198.29
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Samir Arora</b>		<b>Transaction ID: D7347</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 1601 18th Street, N.W. Apartment 1007		Amount of Each Disbursement this Period 161.67
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Samir Arora</b>		<b>Transaction ID: D7348</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1601 18th Street, N.W. Apartment 1007		Amount of Each Disbursement this Period 161.67
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Auburn Quad, Inc.</b>		<b>Transaction ID: D7437</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 6
Mailing Address Post Office Box 390728		Amount of Each Disbursement this Period 0.22
City Cambridge State MA Zip Code 02139	Purpose of Disbursement Banking Fee Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	323.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Kathryn Balcerzak</b>		<b>Transaction ID: D7326</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address 7303 Meadow Wood Way		Amount of Each Disbursement this Period 884.56	
City Clarksville State MD Zip Code 21209	Purpose of Disbursement Wages 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>B. Kathryn Balcerzak</b>		<b>Transaction ID: D7327</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	
Mailing Address 7303 Meadow Wood Way		Amount of Each Disbursement this Period 248.05	
City Clarksville State MD Zip Code 21209	Purpose of Disbursement Wages 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>C. Kathryn Balcerzak</b>		<b>Transaction ID: D7328</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6	
Mailing Address 7303 Meadow Wood Way		Amount of Each Disbursement this Period 248.05	
City Clarksville State MD Zip Code 21209	Purpose of Disbursement Wages 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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1380.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 68

<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Jesse Berney</b>		<b>Transaction ID: D7416</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address 428 Jefferson Street, N.W.		Amount of Each Disbursement this Period 1242.88	
City Washington State DC Zip Code 20011	Purpose of Disbursement Wages 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>B. Jesse Berney</b>		<b>Transaction ID: D7417</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	
Mailing Address 428 Jefferson Street, N.W.		Amount of Each Disbursement this Period 671.19	
City Washington State DC Zip Code 20011	Purpose of Disbursement Wages 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>C. Jesse Berney</b>		<b>Transaction ID: D7418</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6	
Mailing Address 428 Jefferson Street, N.W.		Amount of Each Disbursement this Period 671.19	
City Washington State DC Zip Code 20011	Purpose of Disbursement Wages 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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2585.26
<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 23 / 68

<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Card Services International</b>		<b>Transaction ID: D7415</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address Post Office Box 5180		Amount of Each Disbursement this Period 35.00
City Simi Valley State CA Zip Code 93062-5180	Purpose of Disbursement Banking Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. Central Parking System</b>		<b>Transaction ID: D7341</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6
Mailing Address 1225 Eye Street, N.W. Lower Level		Amount of Each Disbursement this Period 161.25
City Washington State DC Zip Code 20005	Purpose of Disbursement Parking Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. Dennis Cheng</b>		<b>Transaction ID: D7349</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 4 West 21st Street Apartment 7A		Amount of Each Disbursement this Period 621.66
City New York State NY Zip Code 10010	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	817.91
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Dennis Cheng</b>		<b>Transaction ID: D7350</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 4 West 21st Street Apartment 7A		Amount of Each Disbursement this Period 326.84
City New York State NY Zip Code 10010		
Purpose of Disbursement Wages Candidate Name		001 Category/Type
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>B. Dennis Cheng</b>		<b>Transaction ID: D7351</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 4 West 21st Street Apartment 7A		Amount of Each Disbursement this Period 2137.69
City New York State NY Zip Code 10010		
Purpose of Disbursement Wages Candidate Name		001 Category/Type
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>C. Cindy Cicarell</b>		<b>Transaction ID: D7355</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1785 Lewis Road		Amount of Each Disbursement this Period 949.56
City South Wales State NY Zip Code 14139		
Purpose of Disbursement Wages Candidate Name		001 Category/Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3414.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Cindy Cicarell</b>		<b>Transaction ID: D7356</b> Date of Disbursement 12 / 15 / 2006	
Mailing Address 1785 Lewis Road		Amount of Each Disbursement this Period 267.50	
City South Wales State NY Zip Code 14139	Purpose of Disbursement Wages 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>B. Cindy Cicarell</b>		<b>Transaction ID: D7357</b> Date of Disbursement 12 / 29 / 2006	
Mailing Address 1785 Lewis Road		Amount of Each Disbursement this Period 267.50	
City South Wales State NY Zip Code 14139	Purpose of Disbursement Wages 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>C. Cybersource</b>		<b>Transaction ID: D7438</b> Date of Disbursement 12 / 29 / 2006	
Mailing Address 1295 Charleston Road		Amount of Each Disbursement this Period 0.33	
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Banking 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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>535.33</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Cybersource</b>		<b>Transaction ID: D7420</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1295 Charleston Road		Amount of Each Disbursement this Period 52.10
City Mountain View      State CA      Zip Code 94043		
Purpose of Disbursement Banking Fee Candidate Name		001 Category/Type
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>B. Cybersource</b>		<b>Transaction ID: D7421</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address 1295 Charleston Road		Amount of Each Disbursement this Period 92.65
City Mountain View      State CA      Zip Code 94043		
Purpose of Disbursement Banking Fee Candidate Name		001 Category/Type
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>C. Peter Daou</b>		<b>Transaction ID: D7422</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 20 River Terrace Apartment 20-F		Amount of Each Disbursement this Period 1875.00
City New York      State NY      Zip Code 10282		
Purpose of Disbursement Consulting/Communications Candidate Name		001 Category/Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2019.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Peter Daou</b>		<b>Transaction ID: D7423</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 20 River Terrace Apartment 20-F		Amount of Each Disbursement this Period 1250.00
City New York State NY Zip Code 10282	Purpose of Disbursement Consulting/Communications Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. Nalinee Darmrong</b>		<b>Transaction ID: D7329</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1629 Columbia Road, N.W. Apartment 216		Amount of Each Disbursement this Period 858.37
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. Nalinee Darmrong</b>		<b>Transaction ID: D7330</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 1629 Columbia Road, N.W. Apartment 216		Amount of Each Disbursement this Period 240.69
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2349.06
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Nalinee Dartrong</b>		<b>Transaction ID: D7331</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1629 Columbia Road, N.W. Apartment 216		Amount of Each Disbursement this Period 240.69
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Patricia Solis Doyle</b>		<b>Transaction ID: D7301</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 3719 Morrison Street, N.W.		Amount of Each Disbursement this Period 4433.91
City Washington State DC Zip Code 20015	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Patricia Solis Doyle</b>		<b>Transaction ID: D7302</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 3719 Morrison Street, N.W.		Amount of Each Disbursement this Period 2732.75
City Washington State DC Zip Code 20015	Purpose of Disbursement Wages Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7407.35
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Patricia Solis Doyle</b>		<b>Transaction ID: D7303</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 3719 Morrison Street, N.W.		Amount of Each Disbursement this Period 3078.63
City Washington State DC Zip Code 20015	001 Category/ Type	
Purpose of Disbursement Wages 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>B. Nancy Eiring</b>		<b>Transaction ID: D7400</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1213 Duncan Place, N.E.		Amount of Each Disbursement this Period 1727.27
City Washington State DC Zip Code 20002	001 Category/ Type	
Purpose of Disbursement Wages 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>C. Nancy Eiring</b>		<b>Transaction ID: D7401</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 1213 Duncan Place, N.E.		Amount of Each Disbursement this Period 963.03
City Washington State DC Zip Code 20002	001 Category/ Type	
Purpose of Disbursement Wages 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5768.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Nancy Eiring</b>		<b>Transaction ID: D7402</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1213 Duncan Place, N.E.		Amount of Each Disbursement this Period 951.59
City Washington State DC Zip Code 20002	001 Category/ Type	
Purpose of Disbursement Wages 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>B. Electronic Transaction Systems</b>		<b>Transaction ID: D7427</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address 10 Pidgeon Hill Drive		Amount of Each Disbursement this Period 679.67
City Sterling State VA Zip Code 20165	001 Category/ Type	
Purpose of Disbursement Banking Fee 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>C. Matthew Felan</b>		<b>Transaction ID: D7403</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 14224 Jeffries Place		Amount of Each Disbursement this Period 1875.00
City Midlothian State VA Zip Code 23114	003 Category/ Type	
Purpose of Disbursement Consulting/Fundraising 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3506.26
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Matthew Felan</b>		<b>Transaction ID: D7404</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 14224 Jeffries Place		Amount of Each Disbursement this Period 2812.50
City Midlothian State VA Zip Code 23114	Purpose of Disbursement Consulting/Fundraising Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 003

Full Name (Last, First, Middle Initial) <b>B. Lauren Fitterman</b>		<b>Transaction ID: D7362</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 2407 1/2 20th Street, N.W. Apartment 95		Amount of Each Disbursement this Period 802.67
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. Lauren Fitterman</b>		<b>Transaction ID: D7363</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 2407 1/2 20th Street, N.W. Apartment 95		Amount of Each Disbursement this Period 214.06
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3829.23
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Lauren Fitterman</b>		<b>Transaction ID: D7364</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 2407 1/2 20th Street, N.W. Apartment 95		Amount of Each Disbursement this Period 214.06
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Dara Freed</b>		<b>Transaction ID: D7342</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 383 Grand Street Apartment M306		Amount of Each Disbursement this Period 1811.20
City New York State NY Zip Code 10002	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Dara Freed</b>		<b>Transaction ID: D7343</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 383 Grand Street Apartment M306		Amount of Each Disbursement this Period 1015.38
City New York State NY Zip Code 10002	Purpose of Disbursement Wages Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3040.64
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Dara Freed</b>		<b>Transaction ID: D7344</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 383 Grand Street Apartment M306		Amount of Each Disbursement this Period 3712.62
City New York State NY Zip Code 10002	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. John Gans</b>		<b>Transaction ID: D7365</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1425 P Street, N.W. Apartment 301		Amount of Each Disbursement this Period 5170.62
City Washington State DC Zip Code 20005	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. John Gans</b>		<b>Transaction ID: D7366</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 1425 P Street, N.W. Apartment 301		Amount of Each Disbursement this Period 1660.96
City Washington State DC Zip Code 20005	Purpose of Disbursement Wages Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10544.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. John Gans</b>		<b>Transaction ID: D7367</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1425 P Street, N.W. Apartment 301		Amount of Each Disbursement this Period 1660.96
City Washington State DC Zip Code 20005	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Patrick Hallahan</b>		<b>Transaction ID: D7391</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 2011 Hillyer Place, N.W. Apartment 2		Amount of Each Disbursement this Period 766.71
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Patrick Hallahan</b>		<b>Transaction ID: D7392</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 2011 Hillyer Place, N.W. Apartment 2		Amount of Each Disbursement this Period 416.60
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2844.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Patrick Hallahan</b>		<b>Transaction ID: D7393</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 2011 Hillyer Place, N.W. Apartment 2		Amount of Each Disbursement this Period 416.60
City Washington State DC Zip Code 20009	001 Category/ Type	
Purpose of Disbursement Wages 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. Jada Horton</b>		<b>Transaction ID: D7424</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 101 West 126th Street Apartment 2-A		Amount of Each Disbursement this Period 1083.11
City New York State NY Zip Code 10027	001 Category/ Type	
Purpose of Disbursement Wages Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jada Horton</b>		<b>Transaction ID: D7425</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 101 West 126th Street Apartment 2-A		Amount of Each Disbursement this Period 348.94
City New York State NY Zip Code 10027	001 Category/ Type	
Purpose of Disbursement Wages 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) ..... ▶	1848.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Jada Horton</b>		<b>Transaction ID: D7426</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 101 West 126th Street Apartment 2-A		Amount of Each Disbursement this Period 348.94
City New York State NY Zip Code 10027		
Purpose of Disbursement Wages 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>B. Christine Hovde</b>		<b>Transaction ID: D7405</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1503 Autumn Honey Court Apartment D		Amount of Each Disbursement this Period 115.44
City Richmond State VA Zip Code 23229		
Purpose of Disbursement Wages 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>C. Christine Hovde</b>		<b>Transaction ID: D7406</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1503 Autumn Honey Court Apartment D		Amount of Each Disbursement this Period 57.71
City Richmond State VA Zip Code 23229		
Purpose of Disbursement Wages 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	522.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Heather Hurlburt</b>		<b>Transaction ID: D7398</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 516 West Washington		Amount of Each Disbursement this Period 2500.00
City Ann Arbor State MI Zip Code 48103	Purpose of Disbursement Consulting/Communications Candidate Name 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) ▼

Full Name (Last, First, Middle Initial) <b>B. Heather Hurlburt</b>		<b>Transaction ID: D7399</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 516 West Washington		Amount of Each Disbursement this Period 2500.00
City Ann Arbor State MI Zip Code 48103	Purpose of Disbursement Consulting/Communications Candidate Name 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) ▼

Full Name (Last, First, Middle Initial) <b>C. Lindsey K. Jack</b>		<b>Transaction ID: D7352</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 2601 Woodley Place, N.W. Apartment 915		Amount of Each Disbursement this Period 305.01
City Washington State DC Zip Code 20008	Purpose of Disbursement Wages Candidate Name 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5305.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Lindsey K. Jack</b>		<b>Transaction ID: D7353</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 2601 Woodley Place, N.W. Apartment 915		Amount of Each Disbursement this Period 161.61
City Washington State DC Zip Code 20008	001 Category/ Type	
Purpose of Disbursement Wages 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. Lindsey K. Jack</b>		<b>Transaction ID: D7354</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 2601 Woodley Place, N.W. Apartment 915		Amount of Each Disbursement this Period 161.61
City Washington State DC Zip Code 20008	001 Category/ Type	
Purpose of Disbursement Wages Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Judith Lichtman</b>		<b>Transaction ID: D7407</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 2930 Ellicott Street, N.W.		Amount of Each Disbursement this Period 2062.50
City Washington State DC Zip Code 20008	003 Category/ Type	
Purpose of Disbursement Consulting/Fundraising 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) ..... ▶	2385.72
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Judith Lichtman</b>		<b>Transaction ID: D7408</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 2930 Ellicott Street, N.W.		Amount of Each Disbursement this Period 1375.00
City Washington State DC Zip Code 20008	Purpose of Disbursement Consulting/Fundraising Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) <b>B. Jonathan Lovett</b>		<b>Transaction ID: D7395</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1629 Columbia Road, N.W. Apartment 113		Amount of Each Disbursement this Period 523.34
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. Jonathan Lovett</b>		<b>Transaction ID: D7396</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 1629 Columbia Road, N.W. Apartment 113		Amount of Each Disbursement this Period 177.32
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2075.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Jonathan Lovett</b>		<b>Transaction ID: D7397</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1629 Columbia Road, N.W. Apartment 113		Amount of Each Disbursement this Period 177.32
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages 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>B. Bari Lurie</b>		<b>Transaction ID: D7320</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1616 Q Street, N.W. Apartment C		Amount of Each Disbursement this Period 1762.56
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages 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>C. Bari Lurie</b>		<b>Transaction ID: D7321</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 1616 Q Street, N.W. Apartment C		Amount of Each Disbursement this Period 1248.28
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3188.16</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Bari Lurie</b>		<b>Transaction ID: D7322</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1616 Q Street, N.W. Apartment C		Amount of Each Disbursement this Period 3010.43
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Tamera Luzzatto</b>		<b>Transaction ID: D7335</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 3014 32nd Street, N.W.		Amount of Each Disbursement this Period 972.91
City Washington State DC Zip Code 20008	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Tamera Luzzatto</b>		<b>Transaction ID: D7336</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 3014 32nd Street, N.W.		Amount of Each Disbursement this Period 517.02
City Washington State DC Zip Code 20008	Purpose of Disbursement Wages Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Tamera Luzzatto</b>		<b>Transaction ID: D7337</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 3014 32nd Street, N.W.		Amount of Each Disbursement this Period 517.02
City Washington State DC Zip Code 20008	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Capricia Marshall</b>		<b>Transaction ID: D7314</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1413 44th Street, N.W.		Amount of Each Disbursement this Period 2544.04
City Washington State DC Zip Code 20007	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Capricia Marshall</b>		<b>Transaction ID: D7315</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 1413 44th Street, N.W.		Amount of Each Disbursement this Period 1373.08
City Washington State DC Zip Code 20007	Purpose of Disbursement Wages Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4434.14
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Capricia Marshall</b>		<b>Transaction ID: D7316</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1413 44th Street, N.W.		Amount of Each Disbursement this Period 1373.08
City Washington State DC Zip Code 20007	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mayfield Strategy Group</b>		<b>Transaction ID: D7419</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 6
Mailing Address 961 Ilima Way		Amount of Each Disbursement this Period 675.00
City Palo Alto State CA Zip Code 94306-2618	Purpose of Disbursement Consulting/Website Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Shelly Moskwa</b>		<b>Transaction ID: D7308</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1744 V Street, N.W.		Amount of Each Disbursement this Period 405.80
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2453.88
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Shelly Moskwa</b>		<b>Transaction ID: D7309</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	
Mailing Address 1744 V Street, N.W.		Amount of Each Disbursement this Period 216.91	
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages 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>B. Shelly Moskwa</b>		<b>Transaction ID: D7310</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6	
Mailing Address 1744 V Street, N.W.		Amount of Each Disbursement this Period 913.13	
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages 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>C. Anne Mullaly</b>		<b>Transaction ID: D7412</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address 99 Battery Place Apartment 11J		Amount of Each Disbursement this Period 1003.58	
City New York State NY Zip Code 10280	Purpose of Disbursement Wages 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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2133.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Anne Mullaly</b>		<b>Transaction ID: D7413</b> Date of Disbursement 12 / 15 / 2006
Mailing Address 99 Battery Place Apartment 11J		Amount of Each Disbursement this Period 316.00
City New York State NY Zip Code 10280	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Anne Mullaly</b>		<b>Transaction ID: D7414</b> Date of Disbursement 12 / 29 / 2006
Mailing Address 99 Battery Place Apartment 11J		Amount of Each Disbursement this Period 316.00
City New York State NY Zip Code 10280	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. O'Brien McConnell &amp; Pearson</b>		<b>Transaction ID: D7293</b> Date of Disbursement 12 / 21 / 2006
Mailing Address 1726 M Street, N.W. Suite 300		Amount of Each Disbursement this Period -4095.97
City Washington State DC Zip Code 20036	Purpose of Disbursement Direct Mail Candidate Name Category/Type 003	
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) ▼	Void 2003 Duplicate Pymt

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-3463.97
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Sara O'Keefe</b>		<b>Transaction ID: D7394</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address 4200 Fordham Road, N.W.		Amount of Each Disbursement this Period 634.69	
City Washington State DC Zip Code 20016	Purpose of Disbursement Wages 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>B. Bryan Pagliano</b>		<b>Transaction ID: D7428</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address 1601 Colonial Terrace		Amount of Each Disbursement this Period 1274.96	
City Arlington State VA Zip Code 22209	Purpose of Disbursement Wages 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>C. Bryan Pagliano</b>		<b>Transaction ID: D7429</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	
Mailing Address 1601 Colonial Terrace		Amount of Each Disbursement this Period 683.74	
City Arlington State VA Zip Code 22209	Purpose of Disbursement Wages 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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2593.39
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Bryan Pagliano</b>		<b>Transaction ID: D7430</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1601 Colonial Terrace		Amount of Each Disbursement this Period 683.74
City Arlington State VA Zip Code 22209	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Adam J. Parkhomenko</b>		<b>Transaction ID: D7338</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 901 North Pollard Street Number 301		Amount of Each Disbursement this Period 1247.32
City Arlington State VA Zip Code 22203	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Adam J. Parkhomenko</b>		<b>Transaction ID: D7339</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 901 North Pollard Street Number 301		Amount of Each Disbursement this Period 2269.68
City Arlington State VA Zip Code 22203	Purpose of Disbursement Wages Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4200.74
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Adam J. Parkhomenko</b>		<b>Transaction ID: D7340</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 901 North Pollard Street Number 301		Amount of Each Disbursement this Period 668.95
City Arlington State VA Zip Code 22203		
Purpose of Disbursement Wages 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>B. Paychex</b>		<b>Transaction ID: D7304</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 294.23
City Fairfax State VA Zip Code 22031		
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>C. Paychex</b>		<b>Transaction ID: D7305</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 175.00
City Fairfax State VA Zip Code 22031		
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1138.18
<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

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(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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. PNC Bank</b>		<b>Transaction ID: D7358</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 808 17th Street, N.W.		Amount of Each Disbursement this Period 9.51
City Washington State DC Zip Code 20006-3944	Purpose of Disbursement Banking Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. PNC Merchant Services</b>		<b>Transaction ID: D7368</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address 6551 Coventry Way 2nd Floor		Amount of Each Disbursement this Period 1.00
City Clinton State MD Zip Code 20735	Purpose of Disbursement Banking Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. PNC Merchant Services</b>		<b>Transaction ID: D7369</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 6551 Coventry Way 2nd Floor		Amount of Each Disbursement this Period 1.00
City Clinton State MD Zip Code 20735	Purpose of Disbursement Banking Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Ryan Phillips Utrecht &amp; MacKinnon</b>		<b>Transaction ID: D7306</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6
Mailing Address 1133 Connecticut Avenue, N.W. Suite 300		Amount of Each Disbursement this Period 598.66
City Washington State DC Zip Code 20036	Purpose of Disbursement Consulting/Legal Candidate Name 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) ▼

Full Name (Last, First, Middle Initial) <b>B. Ryan Phillips Utrecht &amp; MacKinnon</b>		<b>Transaction ID: D7307</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6
Mailing Address 1133 Connecticut Avenue, N.W. Suite 300		Amount of Each Disbursement this Period 20000.00
City Washington State DC Zip Code 20036	Purpose of Disbursement Consulting/Legal Candidate Name 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) ▼

Full Name (Last, First, Middle Initial) <b>C. Ronald Schneider</b>		<b>Transaction ID: D7359</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 4616 Fessenden Street, N.W.		Amount of Each Disbursement this Period 326.17
City Washington State DC Zip Code 20016	Purpose of Disbursement Wages Candidate Name 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	20924.83
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Ronald Schneider</b>		<b>Transaction ID: D7360</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 4616 Fessenden Street, N.W.		Amount of Each Disbursement this Period 1141.71
City Washington State DC Zip Code 20016	001 Category/ Type	
Purpose of Disbursement Wages 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>B. Ronald Schneider</b>		<b>Transaction ID: D7361</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 4616 Fessenden Street, N.W.		Amount of Each Disbursement this Period 326.17
City Washington State DC Zip Code 20016	001 Category/ Type	
Purpose of Disbursement Wages 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>C. Staples</b>		<b>Transaction ID: D7311</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address Post Office Box 9368		Amount of Each Disbursement this Period 39.74
City Framingham State MA Zip Code 01702	001 Category/ Type	
Purpose of Disbursement Office Supplies 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1507.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: D7312 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 6	
Mailing Address Post Office Box 9368		Amount of Each Disbursement this Period 31.00	
City Framingham State MA Zip Code 01702	Purpose of Disbursement Office Supplies 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>B. Shradda Tewary</b>		Transaction ID: D7409 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address 2 Juliet Court		Amount of Each Disbursement this Period 1007.85	
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Wages 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>C. Shradda Tewary</b>		Transaction ID: D7410 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	
Mailing Address 2 Juliet Court		Amount of Each Disbursement this Period 275.45	
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Wages 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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1314.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Shradda Tewary</b>		<b>Transaction ID: D7411</b> Date of Disbursement 12 / 29 / 2006
Mailing Address 2 Juliet Court		Amount of Each Disbursement this Period 275.45
City Princeton State NJ Zip Code 08540	001 Category/Type	
Purpose of Disbursement Wages 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. The Harry Walker Agency</b>		<b>Transaction ID: D7294</b> Date of Disbursement 12 / 21 / 2006
Mailing Address 355 Lexington Avenue 21st Floor		Amount of Each Disbursement this Period -4137.00
City New York State NY Zip Code 10017	002 Category/Type	
Purpose of Disbursement Travel 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) ▼	Pymt Void: Incorrect Bill

Full Name (Last, First, Middle Initial) <b>C. Thunderball Courier Systems</b>		<b>Transaction ID: D7292</b> Date of Disbursement 12 / 21 / 2006
Mailing Address 1133 Broadway Suite 223		Amount of Each Disbursement this Period -93.50
City New York State NY Zip Code 10010	001 Category/Type	
Purpose of Disbursement Courier Service 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) ▼	Check Written in Error

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-3955.05
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Daniel C. Turrentine</b>		<b>Transaction ID: D7345</b> Date of Disbursement 11 / 30 / 2006
Mailing Address 1425 P Street, N.W. Apartment 604		Amount of Each Disbursement this Period 709.32
City Washington State DC Zip Code 20005	Purpose of Disbursement Wages Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID: D7313</b> Date of Disbursement 12 / 11 / 2006
Mailing Address Post Office Box 17577		Amount of Each Disbursement this Period 36.85
City Baltimore State MD Zip Code 21297-0513	Purpose of Disbursement Internet Service Candidate Name 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Samantha Wolf</b>		<b>Transaction ID: D7332</b> Date of Disbursement 11 / 30 / 2006
Mailing Address 1629 Columbia Road, N.W. Apartment 720		Amount of Each Disbursement this Period 486.31
City Washington State DC Zip Code 20019	Purpose of Disbursement Wages Candidate Name 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1232.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Samantha Wolf</b>		<b>Transaction ID: D7333</b> Date of Disbursement 12 / 15 / 2006
Mailing Address 1629 Columbia Road, N.W. Apartment 720		Amount of Each Disbursement this Period 259.38
City Washington State DC Zip Code 20019	001 Category/ Type	
Purpose of Disbursement Wages 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. Samantha Wolf</b>		<b>Transaction ID: D7334</b> Date of Disbursement 12 / 29 / 2006
Mailing Address 1629 Columbia Road, N.W. Apartment 720		Amount of Each Disbursement this Period 259.38
City Washington State DC Zip Code 20019	001 Category/ Type	
Purpose of Disbursement Wages Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		<b>Transaction ID: D7431</b> Date of Disbursement 11 / 30 / 2006
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 21092.22
City Fairfax State VA Zip Code 22031	001 Category/ Type	
Purpose of Disbursement State/Federal Taxes: Items Below Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>21610.98</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		<b>Transaction ID:</b> D7370 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address Post Office Box 105703		Amount of Each Disbursement this Period 17449.07  <b>[MEMO ITEM]</b>
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Federal Tax 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>B. New York State Employment Taxes</b>		<b>Transaction ID:</b> D7379 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address Post Office Box 4119		Amount of Each Disbursement this Period 599.00  <b>[MEMO ITEM]</b>
City Binghamton State NY Zip Code 13902-4119		
Purpose of Disbursement State Tax 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>C. State of New Jersey</b>		<b>Transaction ID:</b> D7376 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address Division of Taxation Post Office Box 248		Amount of Each Disbursement this Period 21.88  <b>[MEMO ITEM]</b>
City Trenton State NJ Zip Code 08646-0248		
Purpose of Disbursement State Tax 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)

<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Virginia Department of Taxation</b>		<b>Transaction ID: D7323</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address Post Office Box 27264		Amount of Each Disbursement this Period 159.67
City Richmond State VA Zip Code 23261-7264	[MEMO ITEM]	
Purpose of Disbursement State Tax 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>B. Paychex</b>		<b>Transaction ID: D7432</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 5493.56
City Fairfax State VA Zip Code 22031	[MEMO ITEM]	
Purpose of Disbursement Employee Benefits: Item Below 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>C. Merrill Lynch</b>		<b>Transaction ID: D7382</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address Post Office Box 44000		Amount of Each Disbursement this Period 5493.56
City New Brunswick State NJ Zip Code 08906	[MEMO ITEM]	
Purpose of Disbursement Employee Benefits 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5493.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		<b>Transaction ID:</b> D7433 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 2783.28
City Fairfax State VA Zip Code 22031	001 Category/ Type	
Purpose of Disbursement Employee Benefits: Item Below		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Merrill Lynch</b>		<b>Transaction ID:</b> D7383 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address Post Office Box 44000		Amount of Each Disbursement this Period 2783.28
City New Brunswick State NJ Zip Code 08906	001 Category/ Type	
Purpose of Disbursement Employee Benefits		
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>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		<b>Transaction ID:</b> D7434 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 8449.52
City Fairfax State VA Zip Code 22031	001 Category/ Type	
Purpose of Disbursement State/Federal Taxes: Items Below		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11232.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		<b>Transaction ID:</b> D7371 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address Post Office Box 105703		Amount of Each Disbursement this Period 7033.54  <b>[MEMO ITEM]</b>
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Federal Tax 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>B. New York State Employment Taxes</b>		<b>Transaction ID:</b> D7380 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address Post Office Box 4119		Amount of Each Disbursement this Period 138.93  <b>[MEMO ITEM]</b>
City Binghamton State NY Zip Code 13902-4119		
Purpose of Disbursement State Tax 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>C. State of New Jersey</b>		<b>Transaction ID:</b> D7377 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address Division of Taxation Post Office Box 248		Amount of Each Disbursement this Period 5.08  <b>[MEMO ITEM]</b>
City Trenton State NJ Zip Code 08646-0248		
Purpose of Disbursement State Tax 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)

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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)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Virginia Department of Taxation</b>		<b>Transaction ID: D7324</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address Post Office Box 27264		Amount of Each Disbursement this Period 204.59
City Richmond State VA Zip Code 23261-7264	[MEMO ITEM]	
Purpose of Disbursement State Tax 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>B. Paychex</b>		<b>Transaction ID: D7435</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 3332.94
City Fairfax State VA Zip Code 22031	[MEMO ITEM]	
Purpose of Disbursement Employee Benefits: Item Below 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>C. Merrill Lynch</b>		<b>Transaction ID: D7384</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address Post Office Box 44000		Amount of Each Disbursement this Period 3332.94
City New Brunswick State NJ Zip Code 08906	[MEMO ITEM]	
Purpose of Disbursement Employee Benefits 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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3332.94
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		<b>Transaction ID:</b> D7436 Date of Disbursement 12 / 29 / 2006
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 14817.11
City Fairfax	State VA Zip Code 22031	
Purpose of Disbursement State/Federal Taxes: Items Below		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>B. Comptroller of the Treasury</b>		<b>Transaction ID:</b> D7387 Date of Disbursement 12 / 29 / 2006
Mailing Address Withholding Tax Section Income Tax Division		Amount of Each Disbursement this Period 18.44
City Annapolis	State MD Zip Code 21411	
Purpose of Disbursement State Tax		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>C. DC Office of Tax and Revenue</b>		<b>Transaction ID:</b> D7375 Date of Disbursement 12 / 29 / 2006
Mailing Address Ben Franklin Station Post Office Box 7792		Amount of Each Disbursement this Period 1553.00
City Washington	State DC Zip Code 20044	
Purpose of Disbursement State Tax		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	14817.11
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial) <b>A. Department of Employment Service</b>		<b>Transaction ID:</b> D7390 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address Office of Unemployment Comp. Post Office Box 96664		Amount of Each Disbursement this Period 33.75
City Washington State DC Zip Code 20090-6664	[MEMO ITEM]	
Purpose of Disbursement State Tax 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>B. Internal Revenue Service</b>		<b>Transaction ID:</b> D7372 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address Post Office Box 105703		Amount of Each Disbursement this Period 12097.06
City Atlanta State GA Zip Code 30348	[MEMO ITEM]	
Purpose of Disbursement Federal Tax 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>C. New York State Employment Taxes</b>		<b>Transaction ID:</b> D7381 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address Post Office Box 4119		Amount of Each Disbursement this Period 1048.65
City Binghamton State NY Zip Code 13902-4119	[MEMO ITEM]	
Purpose of Disbursement State Tax 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Hill PAC

**A.** Full Name (Last, First, Middle Initial)  
State of New Jersey

Mailing Address Division of Taxation  
Post Office Box 248

City Trenton State NJ Zip Code 08646-0248

Purpose of Disbursement State Tax  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: D7378  
Date of Disbursement  
12 / 29 / 2006

Amount of Each Disbursement this Period  
5.08

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Virginia Department of Taxation

Mailing Address Post Office Box 27264

City Richmond State VA Zip Code 23261-7264

Purpose of Disbursement State Tax  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: D7325  
Date of Disbursement  
12 / 29 / 2006

Amount of Each Disbursement this Period  
61.13

[MEMO ITEM]

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

0.00

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

169324.08

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Dragonfly	Nature of Debt (Purpose): Event Expense: Flowers
Mailing Address 30 South Quaker Lane Suite 100	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="591.58"/>	<b>Transaction ID: D7107</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="591.58"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mayfield Strategy Group	Nature of Debt (Purpose): Consulting/Website
Mailing Address 961 Ilima Way	
City State ZIP Code Palo Alto CA 94306-2618	

Outstanding Balance Beginning This Period <input type="text" value="3780.14"/>	<b>Transaction ID: D6499</b>	
Amount Incurred This Period <input type="text" value="22.34"/>	Payment This Period <input type="text" value="675.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3127.48"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Merkle Response Services	Nature of Debt (Purpose): Direct Mail
Mailing Address 13331 Pennsylvania Avenue	
City State ZIP Code Hagerstown MD 21742	

Outstanding Balance Beginning This Period <input type="text" value="850.00"/>	<b>Transaction ID: D4615</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="850.00"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="4569.06"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Software	Nature of Debt (Purpose): Consulting/Computers
Mailing Address 5505 Connecticut Avenue, N.W. Post Mail Box 277	
City State ZIP Code Washington DC 20015	

Outstanding Balance Beginning This Period <input type="text" value="5445.71"/>	<b>Transaction ID: D3231</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5445.71"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Occasions Caterers	Nature of Debt (Purpose): Event Expense: Food & Beverage
Mailing Address 5458 3rd Street, N.E.	
City State ZIP Code Washington DC 20011	

Outstanding Balance Beginning This Period <input type="text" value="6021.78"/>	<b>Transaction ID: D6330</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6021.78"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Ryan Phillips Utrecht & MacKinnon	Nature of Debt (Purpose): Consulting/Legal
Mailing Address 1133 Connecticut Avenue, N.W. Suite 300	
City State ZIP Code Washington DC 20036	

Outstanding Balance Beginning This Period <input type="text" value="15471.78"/>	<b>Transaction ID: D785</b>	
Amount Incurred This Period <input type="text" value="5126.88"/>	Payment This Period <input type="text" value="20598.66"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="11467.49"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text" value="16036.55"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value=""/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value=""/>

Image# 27960040875

Form/Schedule: **F3XN**  
Transaction ID:

Effective January 1, 2007, HILLPAC is changing its 2007 filing frequency from monthly reporting to semi-annual reporting.

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