

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 White Mountain PAC

ADDRESS (number and street) P.O. Box 1772 Check if different than previously reported. (ACC) Concord NH 03302 1772

2. FEC IDENTIFICATION NUMBER C00370932 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(Q1) X July 15 Quarterly Report(Q2) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) July 31 Mid-Year Report(Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12G) Election on in the State of (d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 01 01 2006 through 03 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 H. Scott Flegal Signature of Treasurer Electronically Filed by H. Scott Flegal Date 04 10 2006

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

Office Use Only FEC FORM 3X (Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
White Mountain PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">218105.30</td></tr></table>	218105.30
Y	Y	Y	Y									
2	0	0	6									
218105.30												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">218105.30</td></tr></table>	218105.30										
218105.30												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">13500.00</td></tr></table>	13500.00	<table border="1" style="width: 100%;"><tr><td align="right">13500.00</td></tr></table>	13500.00								
13500.00												
13500.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">231605.30</td></tr></table>	231605.30	<table border="1" style="width: 100%;"><tr><td align="right">231605.30</td></tr></table>	231605.30								
231605.30												
231605.30												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">46902.61</td></tr></table>	46902.61	<table border="1" style="width: 100%;"><tr><td align="right">46902.61</td></tr></table>	46902.61								
46902.61												
46902.61												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">184702.69</td></tr></table>	184702.69	<table border="1" style="width: 100%;"><tr><td align="right">184702.69</td></tr></table>	184702.69								
184702.69												
184702.69												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
White Mountain PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5000.00	5000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5000.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	8500.00	8500.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	13500.00	13500.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	13500.00	13500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13500.00	13500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1142.62	1142.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1142.62	1142.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	30200.00	30200.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	15559.99	15559.99
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))..	46902.61	46902.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	46902.61	46902.61

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)	13500.00	13500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13500.00	13500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1142.62	1142.62
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1142.62	1142.62

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 16
	(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)
White Mountain PAC

A. Full Name (Last, First, Middle Initial)
David F. Taylor

Mailing Address 708 W. Braddock Road

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation
Capitol Solutions Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	6

Transaction ID: SA11A1.5278

Amount of Each Receipt this Period
5000.00

2006 Contribution

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	5000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 16
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. ALBERTSON'S INC POLITICAL ACTION COMMITTEE (FKA AMER STORES CO FED PAC)		Date of Receipt MM / DD / YYYY 02 / 17 / 2006
Mailing Address PO BOX 20		Transaction ID: SA11C.5270
City BOISE	State ID	Zip Code 83726
FEC ID number of contributing federal political committee. C C00243220		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Leadership Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. CLARKPAC OF CLARK CONSULTING		Date of Receipt MM / DD / YYYY 02 / 14 / 2006
Mailing Address 101 Constitution Ave NW Suite 701 E		Transaction ID: SA11C.5276
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00381541		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	2006 Contribution
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) C. General Motors Corporation PAC		Date of Receipt MM / DD / YYYY 01 / 31 / 2006
Mailing Address 1660 L Street, NW Suite 400		Transaction ID: SA11C.5272
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C C00076810		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	2006 Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 16
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
White Mountain PAC

A. Full Name (Last, First, Middle Initial)
NICKLES GROUP PAC

Mailing Address 601 Thirteenth St NW
Suite 250 North

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00115972

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	0	6

Transaction ID: SA11C.5273

Amount of Each Receipt this Period
2000.00

2006 Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	8500.00

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

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

FOR LINE NUMBER: (check only one)

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

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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: SB21B.5305 Date of Disbursement																					
Mailing Address PO Box 60075		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	7		2	0	0	6														
City City of Industry	State CA	Zip Code 91716-0075	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment (see memo)		002	758.42																				
Candidate Name		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. Bank of America		Transaction ID: SB21B.5309 Date of Disbursement																					
Mailing Address PO Box 60075		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	7		2	0	0	6														
City City of Industry	State CA	Zip Code 91716-0075	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment (see Memo)		002	384.20																				
Candidate Name		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) C. Budget Rent-a-car		Transaction ID: SB21B.5306 Date of Disbursement																					
Mailing Address 6 Sylvan Way		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		1	3		2	0	0	6														
City Parsippany	State NJ	Zip Code 07054	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment		002	175.61																				
Candidate Name		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:																							

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	1142.62
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Budget Rent-a-car		Transaction ID: SB21B.5308 Date of Disbursement 01 / 16 / 2006
Mailing Address 6 Sylvan Way		Amount of Each Disbursement this Period 672.86
City Parsippany State NJ Zip Code 07054	[MEMO ITEM]	
Purpose of Disbursement Credit card payment Candidate Name		002 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. Caren's Caravan Service		Transaction ID: SB21B.5352 Date of Disbursement 01 / 04 / 2006
Mailing Address PO Box 832		Amount of Each Disbursement this Period 235.00
City Exeter State NH Zip Code 03833	[MEMO ITEM]	
Purpose of Disbursement Credit Card Payment Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Enterprise Rent-a-car Company of Boston, Inc.		Transaction ID: SB21B.5354 Date of Disbursement 01 / 05 / 2006
Mailing Address 400 Spaulding Turnpike		Amount of Each Disbursement this Period 149.34
City Portsmouth State NH Zip Code 03802	[MEMO ITEM]	
Purpose of Disbursement Credit Card Payment Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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

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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. ExxonMobil		Transaction ID: SB21B.5349 Date of Disbursement 12 / 18 / 2005
Mailing Address 5959 Las Colinas Blvd		Amount of Each Disbursement this Period 34.58
City Irving State TX Zip Code 75039	Purpose of Disbursement Credit Card Payment 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) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Jardiniere Florist		Transaction ID: SB21B.5350 Date of Disbursement 12 / 29 / 2005
Mailing Address 775 Lafayette Rd		Amount of Each Disbursement this Period 82.50
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Credit Card Payment 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) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Philbrick's		Transaction ID: SB21B.5351 Date of Disbursement 12 / 30 / 2005
Mailing Address 28 Deer Street		Amount of Each Disbursement this Period 71.20
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Credit Card Payment 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) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 16

<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

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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. U.S. Airways		Transaction ID: SB21B.5310 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 111 W. Rio Salando Parkway		Amount of Each Disbursement this Period 187.10
City Tempe State AZ Zip Code 85281	Purpose of Disbursement Credit Card Payment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. U.S. Airways		Transaction ID: SB21B.5312 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 111 W. Rio Salando Parkway		Amount of Each Disbursement this Period 187.10
City Tempe State AZ Zip Code 85281	Purpose of Disbursement Credit Card Payment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. U.S. Airways		Transaction ID: SB21B.5313 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 111 W. Rio Salando Parkway		Amount of Each Disbursement this Period 10.00
City Tempe State AZ Zip Code 85281	Purpose of Disbursement Credit Card Payment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	1142.62

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 16

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

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

NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Friends of Tom Eaton		Transaction ID: SB23.5291 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6
Mailing Address P.O. Box 220		Amount of Each Disbursement this Period 100.00
City Hancock State NH Zip Code 03449	011 Category/ Type	
Purpose of Disbursement Contribution 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. MARK KENNEDY 06		Transaction ID: SB23.5295 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 6
Mailing Address PO BOX 49333		Amount of Each Disbursement this Period 5000.00
City BLAINE State MN Zip Code 55449	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. NATIONAL REPUBLICAN SENATORIAL COMMITTEE		Transaction ID: SB23.5297 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 6
Mailing Address 425 SECOND STREET NE		Amount of Each Disbursement this Period 15000.00
City WASHINGTON State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	20100.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 16

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

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

NAME OF COMMITTEE (In Full)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Rob Boyce for State Senate 2006		Transaction ID: SB23.5293 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6
Mailing Address 22 Frohock Brook Rd		Amount of Each Disbursement this Period 100.00
City Alton Bay State NH Zip Code 03810	Purpose of Disbursement Contribution 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) ▼	011 Category/Type

Full Name (Last, First, Middle Initial) B. TOM KEAN FOR US SENATE INC		Transaction ID: SB23.5289 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6
Mailing Address PO BOX 225		Amount of Each Disbursement this Period 5000.00
City COLONIA State NJ Zip Code 07067	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

Full Name (Last, First, Middle Initial) C. TOM KEAN FOR US SENATE INC		Transaction ID: SB23.5298 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address PO BOX 225		Amount of Each Disbursement this Period 5000.00
City COLONIA State NJ Zip Code 07067	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	10100.00
TOTAL This Period (last page this line number only) ▶	30200.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 16

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

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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. L Cheryl Freed		Transaction ID: SB29.5287 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6	
Mailing Address 159 Main Street		Amount of Each Disbursement this Period 450.00	
City Nashua	State NH	Zip Code 03060	
Purpose of Disbursement Q1 Administration		Category/ Type 001	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
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. M. P. Housing		Transaction ID: SB29.5279 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6	
Mailing Address 87 Palm Street		Amount of Each Disbursement this Period 5000.00	
City Nashua	State NH	Zip Code 03060	
Purpose of Disbursement Donation		Category/ Type 012	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Joel Maiola		Transaction ID: SB29.5283 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6	
Mailing Address 3 Fernwood Place		Amount of Each Disbursement this Period 109.99	
City Bow	State NH	Zip Code 03304	
Purpose of Disbursement Travel Reimbursement		Category/ Type 002	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5559.99
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 16

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

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)
White Mountain PAC

Full Name (Last, First, Middle Initial) A. Pearson & Associates		Transaction ID: SB29.5281 Date of Disbursement
Mailing Address 1331 H Street, NW 12th Floor		<input type="text" value="02"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Consulting Fee		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="001"/> Category/ Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

Full Name (Last, First, Middle Initial) B. Pearson & Associates		Transaction ID: SB29.5286 Date of Disbursement
Mailing Address 1331 H Street, NW 12th Floor		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Consulting Fee		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="001"/> Category/ Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="15559.99"/>