

# 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  
Dickstein Shapiro Morin & Oshinsky LLP PAC

ADDRESS (number and street) 2101 L Street, NW  
 Check if different than previously reported. (ACC)  
Washington DC 20037

2. **FEC IDENTIFICATION NUMBER** C00110197  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on 06 13 2006 in the State of SC  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 04 01 2006 through 05 24 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 Mr. L. Andrew Zausner

Signature of Treasurer Electronically Filed by Mr. L. Andrew Zausner Date 06 29 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Dickstein Shapiro Morin & Oshinsky LLP PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	5

D	D
2	4

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		78227.80
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	44267.23									
(c) Total Receipts (from Line 19) .....	0.00	640.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	44267.23	78867.80								
7. Total Disbursements (from Line 31) .....	19463.99	54064.56								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	24803.24	24803.24								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.60									

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  
Dickstein Shapiro Morin & Oshinsky LLP PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	5

D	D
2	4

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	0.00	640.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	640.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	640.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	640.00
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)) .....	0.00	640.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0.00	640.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	5000.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	5000.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19463.99	49064.56
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19463.99	54064.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	19463.99	54064.56

**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) .....	0.00	640.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	640.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	5000.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	5000.00

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

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro Morin & Oshinsky LLP PAC

Full Name (Last, First, Middle Initial) <b>A. BARRETT FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.6371
Mailing Address P.O. Box 869 PO BOX 869		Date of Disbursement MM / DD / YYYY 04 / 25 / 2006
City Westminster	State SC	Zip Code 29693
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dickstein Shapiro Morin &amp; Oshinsky LLP</b>		<b>Transaction ID:</b> SB23.6431
Mailing Address 2101 L Street, NW		Date of Disbursement MM / DD / YYYY 04 / 27 / 2006
City Washington	State DC	Zip Code 20037
Purpose of Disbursement In-Kind Contribution		Amount of Each Disbursement this Period 15.16
Candidate Name NELSON FOR U S SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE	District: 00	

Full Name (Last, First, Middle Initial) <b>C. Dickstein Shapiro Morin &amp; Oshinsky LLP</b>		<b>Transaction ID:</b> SB23.6432
Mailing Address 2101 L Street, NW		Date of Disbursement MM / DD / YYYY 05 / 10 / 2006
City Washington	State DC	Zip Code 20037
Purpose of Disbursement In-Kind Contribution		Amount of Each Disbursement this Period 15.16
Candidate Name FRIENDS OF ROBERT C BYRD COMMITTEE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1030.32</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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro Morin & Oshinsky LLP PAC

Full Name (Last, First, Middle Initial) <b>A. Dickstein Shapiro Morin &amp; Oshinsky LLP</b>		Transaction ID: SB23.6433 Date of Disbursement 05 / 24 / 2006	
Mailing Address 2101 L Street, NW		Amount of Each Disbursement this Period 15.16	
City Washington	State DC	Zip Code 20037	Category/ Type
Purpose of Disbursement In-Kind Contribution			
Candidate Name TALENT FOR SENATE INC			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MO	District: 00		

Full Name (Last, First, Middle Initial) <b>B. Equinox</b>		Transaction ID: SB23.6372 Date of Disbursement 04 / 27 / 2006	
Mailing Address 818 Connecticut Avenue, NW		Amount of Each Disbursement this Period 750.00	
City Washington	State DC	Zip Code 20006	Category/ Type
Purpose of Disbursement In-Kind Contribution			
Candidate Name NELSON FOR U S SENATE			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NE	District: 00		

Full Name (Last, First, Middle Initial) <b>C. Equinox</b>		Transaction ID: SB23.6386 Date of Disbursement 05 / 11 / 2006	
Mailing Address 818 Connecticut Avenue, NW		Amount of Each Disbursement this Period 715.00	
City Washington	State DC	Zip Code 20006	Category/ Type
Purpose of Disbursement In-Kind Contribution			
Candidate Name FRIENDS OF ROBERT C BYRD COMMITTEE			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WV	District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1480.16</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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro Morin & Oshinsky LLP PAC

Full Name (Last, First, Middle Initial) <b>A. Equinox</b>		<b>Transaction ID:</b> SB23.6391 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 818 Connecticut Avenue, NW		Amount of Each Disbursement this Period 750.00
City Washington State DC Zip Code 20006	Category/ Type	
Purpose of Disbursement In-Kind Contribution		
Candidate Name TALENT FOR SENATE INC		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JIM OBERSTAR</b>		<b>Transaction ID:</b> SB23.6378 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 424 WARNER STREET NW		Amount of Each Disbursement this Period 1000.00
City WASHINGTON State DC Zip Code 20001	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: 8	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		<b>Transaction ID:</b> SB23.6383 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 607 14TH STREET NW SUITE 800		Amount of Each Disbursement this Period 1809.47
City WASHINGTON State DC Zip Code 20005	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3559.47</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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro Morin & Oshinsky LLP PAC

Full Name (Last, First, Middle Initial) <b>A. HAROLD FORD JR FOR TENNESSEE</b>		<b>Transaction ID: SB23.6368</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address 5120 Barry Road SUITE 1300		Amount of Each Disbursement this Period 2000.00
City Memphis State TN Zip Code 38117	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. HAYES FOR CONGRESS</b>		<b>Transaction ID: SB23.6387</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address Post Office Box 2000		Amount of Each Disbursement this Period 1500.00
City Concord State NC Zip Code 28026	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. LINCOLN DAVIS FOR CONGRESS</b>		<b>Transaction ID: SB23.6388</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address PO BOX 350		Amount of Each Disbursement this Period 1000.00
City JAMESTOWN State TN Zip Code 38556	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro Morin & Oshinsky LLP PAC

Full Name (Last, First, Middle Initial) <b>A. MIKE MCINTYRE FOR CONGRESS</b>		<b>Transaction ID: SB23.6380</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address PO BOX 1		Amount of Each Disbursement this Period 2000.00
City LUMBERTON State NC Zip Code 28359	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. NELSON FOR U S SENATE</b>		<b>Transaction ID: SB23.6377</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address PO BOX 8666		Amount of Each Disbursement this Period 2000.00
City OMAHA State NE Zip Code 68108	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. NEXT CENTURY FUND</b>		<b>Transaction ID: SB23.6379</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address PO BOX 99779		Amount of Each Disbursement this Period 1500.00
City RALEIGH State NC Zip Code 27624	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) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5500.00</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)

PAGE 11 / 13

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

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro Morin & Oshinsky LLP PAC

Full Name (Last, First, Middle Initial) <b>A. Nosegay Florist</b>		<b>Transaction ID: SB23.6373</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 1120 20th Street, NW		Amount of Each Disbursement this Period 79.89
City Washington State DC Zip Code 20036	Purpose of Disbursement In-Kind Contribution Candidate Name NELSON FOR U S SENATE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NE District: 00	
Category/Type		
Category/Type		

Full Name (Last, First, Middle Initial) <b>B. Nosegay Florist</b>		<b>Transaction ID: SB23.6385</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 1120 20th Street, NW		Amount of Each Disbursement this Period 79.31
City Washington State DC Zip Code 20036	Purpose of Disbursement In-Kind Contribution Candidate Name FRIENDS OF ROBERT C BYRD COMMITTEE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WV District: 00	
Category/Type		
Category/Type		

Full Name (Last, First, Middle Initial) <b>C. Nosegay Florist</b>		<b>Transaction ID: SB23.6390</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 1120 20th Street, NW		Amount of Each Disbursement this Period 79.31
City Washington State DC Zip Code 20036	Purpose of Disbursement In-Kind Contribution Candidate Name TALENT FOR SENATE INC Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 00	
Category/Type		
Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	238.51
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro Morin & Oshinsky LLP PAC

Full Name (Last, First, Middle Initial) <b>A. RON LEWIS FOR CONGRESS</b>		<b>Transaction ID: SB23.6381</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address PO Box 307		Amount of Each Disbursement this Period 1000.00
City Elizabethtown State KY Zip Code 42702	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. SWEENEY FOR CONGRESS</b>		<b>Transaction ID: SB23.6382</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address Post Office Box 1465		Amount of Each Disbursement this Period 1000.00
City Clifton Park State NY Zip Code 12065	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. TALENT FOR SENATE INC</b>		<b>Transaction ID: SB23.6392</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 147 N MERAMEC SUITE 100		Amount of Each Disbursement this Period 1155.53
City ST LOUIS State MO Zip Code 63105	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3155.53</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>19463.99</b>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 13 / 13	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Dickstein Shapiro Morin & Oshinsky LLP PAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Dickstein Shapiro Morin & Oshinsky, LLP	Nature of Debt (Purpose): Aministrative costs
Mailing Address 2101 L Street, NW	
City State ZIP Code Washington, DC 20037	

Outstanding Balance Beginning This Period <input type="text" value="-409.80"/>	<b>Transaction ID: SD10.102</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="-409.80"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Dickstein Shapiro Morin & Oshinsky, LLP	Nature of Debt (Purpose): Admin. Costs (fax, copy, rent, etc.)
Mailing Address 2101 L Street, NW	
City State ZIP Code Washington, DC 20037	

Outstanding Balance Beginning This Period <input type="text" value="410.40"/>	<b>Transaction ID: SD10.183</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="410.40"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.60"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text" value="0.60"/>
<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"/>