

**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

DAKPAC

ADDRESS (number and street)

607 14th Street, NW, Suite 800

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00364356

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

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

2007

through

06

30

2007

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

Mary Wakefield

Signature of Treasurer

Electronically Filed by Mary Wakefield

Date

07

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.

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
DAKPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y</span> <span>2007</span>		27349.05
(b) Cash on Hand at Beginning of Reporting Period .....	27349.05	
(c) Total Receipts (from Line 19) .....	55000.00	55000.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	82349.05	82349.05
7. Total Disbursements (from Line 31) .....	81078.40	81078.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1270.65	1270.65
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name  
DAKPAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5000.00	5000.00
(i) Itemized (use Schedule A) .....		
(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) .....	50000.00	50000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	55000.00	55000.00
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)) .....	55000.00	55000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	55000.00	55000.00

**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)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	9078.40	9078.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	9078.40	9078.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	74500.00	74500.00
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.....	-2500.00	-2500.00
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))..	81078.40	81078.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	81078.40	81078.40

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	55000.00	55000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	55000.00	55000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9078.40	9078.40
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9078.40	9078.40

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

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

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

**A.** Full Name (Last, First, Middle Initial)  
Richard J. Tarplin

Mailing Address 1875 I Street, NW  
Suite 400

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Timmons & Company, Inc.

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: C424

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Harvey E. Cauthen, Jr.

Mailing Address 800 Cauthen Drive

City State Zip Code  
Montgomery AL 36105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Cauthen and Cauthen

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: C451

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Frederick H. Graefe

Mailing Address 1050 Connecticut Ave., NW  
Suite 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Law Offices of Frederick  
Graefe PL

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: C425

Amount of Each Receipt this Period

1000.00

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

2500.00

**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 7 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

Full Name (Last, First, Middle Initial)

A. John D. Raffaelli

Mailing Address 1401 K Street, NW  
Suite 400

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol Counsel, LLC

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 1 / 2 0 0 7

Transaction ID: C442

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Niles L. Godes

Mailing Address 315 South Ivy Street

City State Zip Code  
Arlington VA 22204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clark & Weinstock

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: C450

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Thomas H. Quinn

Mailing Address 575 7th Street, NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Venable, LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: C431

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1500.00

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 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

A. Full Name (Last, First, Middle Initial)  
Shannon J. Finley

Mailing Address 2909 Cleveland Avenue, NW

City State Zip Code  
Washington DC 20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol Counsel, LLC

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 0 7

Transaction ID: C446

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

1000.00

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: PAGE 9 / 26

(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			

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NAME OF COMMITTEE (In Full)

DAKPAC

Full Name (Last, First, Middle Initial)

**A.** Genesis Healthcare Corporation PAC

Mailing Address 101 East State Street

City	State	Zip Code
Kennett Square	PA	19348

FEC ID number of contributing federal political committee.

**C** C00292094

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
0	3	/	0	5	/	2	0	0	7

Transaction ID: C426

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** Community Action Program PACMailing Address 810 First Street, N.E.  
Suite 530

City	State	Zip Code
Washington	DC	20002

FEC ID number of contributing federal political committee.

**C** C00163048

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
0	3	/	0	5	/	2	0	0	7

Transaction ID: C432

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C.** Zeneca, Inc. Political Action Committee

Mailing Address 1800 Concord Pike PO Box 15437

City	State	Zip Code
Wilmington	DE	19850

FEC ID number of contributing federal political committee.

**C** C00279455

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	7

Transaction ID: C444

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

6000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

Full Name (Last, First, Middle Initial)

**A.** Federal Home Loan Mortgage Corporation Political Action Committee

Mailing Address 8200 Jones Bridge Drive

City State Zip Code  
 Mc Lean VA 22102

FEC ID number of contributing  
federal political committee. **C** C00404129

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 6 / 2 0 0 7

Transaction ID: C448

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Seniors Housing PAC

Mailing Address 5100 Wisconsin Avenue, NW  
 Suite 307

City State Zip Code  
 Washington DC 20016

FEC ID number of contributing  
federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: C434

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Caremark Rx, Inc. Employees Political Action Committee

Mailing Address 2211 Sanders Road  
 10th Floor

City State Zip Code  
 Northbrook IL 60062

FEC ID number of contributing  
federal political committee. **C** C00384818

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 3 / 2 6 / 2 0 0 7

Transaction ID: C439

Amount of Each Receipt this Period

2000.00

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

3500.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

**A.** Full Name (Last, First, Middle Initial)  
Honeywell International Political Action Committee

Mailing Address 101 Constitution Avenue NW  
Suite 500 West

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00096156

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: C423

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)

Xcel Energy Employee PAC

Mailing Address 1225 17th Street  
Suite 900

City State Zip Code  
Denver CO 80202

FEC ID number of contributing  
federal political committee.

**C** C00107771

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 7

Transaction ID: C433

Amount of Each Receipt this Period

1000.00

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

Natl Assn of Insurance & Financial Advisors PAC

Mailing Address 2901 Telestar Court

City State Zip Code  
Falls Church VA 22042

FEC ID number of contributing  
federal political committee.

**C** C00005249

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  
0 3 / 2 7 / 2 0 0 7

Transaction ID: C443

Amount of Each Receipt this Period

5000.00

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

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 26

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

Full Name (Last, First, Middle Initial)

**A.** Trucking PAC of the American Trucking Association

Mailing Address 430 First Street, S.E.  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00002881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 7

Transaction ID: C440

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Federal Express PAC

Mailing Address 942 South Shady Grove Road

City State Zip Code  
Memphis TN 38120

FEC ID number of contributing  
federal political committee.

**C** C00068692

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  
0 3 / 3 0 / 2 0 0 7

Transaction ID: C445

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.** Sidley Austin LLP Good Government Fund

Mailing Address 787 Seventh Avenue

City State Zip Code  
New York NY 10019

FEC ID number of contributing  
federal political committee.

**C** C00351270

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 Y  
0 3 / 2 1 / 2 0 0 7

Transaction ID: C441

Amount of Each Receipt this Period

2000.00

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

8000.00

**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 13 / 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

Full Name (Last, First, Middle Initial)

**A.** Delta Dental Plans Association PAC

Mailing Address 1515 W 22nd St., Suite 1200

City State Zip Code  
Oak Brook IL 60523

FEC ID number of contributing  
federal political committee. **C** C00213819

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  
03 / 08 / 2007

Transaction ID: C437

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** American Wind Energy Association Political Action Committee

Mailing Address 1101 14th Street, NW  
12th Floor

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00259572

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 05 / 2007

Transaction ID: C429

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Miller Brewing Company PAC

Mailing Address 3939 West Highland Boulevard

City State Zip Code  
Milwaukee WI 53201

FEC ID number of contributing  
federal political committee. **C** C00102780

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 16 / 2007

Transaction ID: C447

Amount of Each Receipt this Period

1000.00

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

4500.00

**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 14 / 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

Full Name (Last, First, Middle Initial)

**A.** American Podiatry Medical Assn., Inc. Podiatry Political Action Committee

Mailing Address 9312 Old Georgetown Road

City State Zip Code  
 Bethesda MD 20814

FEC ID number of contributing  
federal political committee.

**C** C00008839

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  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: C435

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** American Crystal Sugar Company PAC

Mailing Address 101 North Third Street

City State Zip Code  
 Moorhead MN 56560

FEC ID number of contributing  
federal political committee.

**C** C00110338

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  
 0 3 / 0 8 / 2 0 0 7

Transaction ID: C436

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.** Association of Progressive Rental Organizations PAC

Mailing Address 1504 Robin Hood Trail  
 Houston Building

City State Zip Code  
 Austin TX 78703

FEC ID number of contributing  
federal political committee.

**C** C00166223

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 6 / 2 0 0 7

Transaction ID: C449

Amount of Each Receipt this Period

1000.00

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

8500.00

**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 15 / 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

Full Name (Last, First, Middle Initial)

**A.** American Society of Pension Professionals & Actuaries PAC

Mailing Address 4245 North Fairfax Drive  
Suite 750

City State Zip Code  
Arlington VA 22203

FEC ID number of contributing  
federal political committee.

**C** C00333104

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  
0 3 / 0 5 / 2 0 0 7

Transaction ID: C428

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** Groom Law Group Chartered Political Action Committee

Mailing Address 1701 Pennsylvania Avenue, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00394775

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  
0 3 / 0 5 / 2 0 0 7

Transaction ID: C427

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C.** Investment Company Institute Political Action Committee

Mailing Address 1401 H Street, NW  
Suite 1200

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00105981

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  
0 3 / 2 2 / 2 0 0 7

Transaction ID: C438

Amount of Each Receipt this Period

2500.00

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

7500.00

**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 16 / 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DAKPAC

Full Name (Last, First, Middle Initial)

A. American Association for Justice Political Action Committee

Mailing Address 1050 31st Street N.W.

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

C00024521

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  
0 3 / 0 5 / 2 0 0 7

Transaction ID: C430

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

5000.00

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

50000.00



# **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 17 / 26

<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)  
DAKPAC

Full Name (Last, First, Middle Initial)

## **A.** Perkins Coie LLP

Mailing Address 607 14th Street, N.W.  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D1129

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2197.20

Full Name (Last, First, Middle Initial)

## **B.** Perkins Coie LLP

Mailing Address 607 14th Street, N.W.  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D1133

Date of Disbursement

/   /

Amount of Each Disbursement this Period

779.03

Full Name (Last, First, Middle Initial)

## **C.** Perkins Coie LLP

Mailing Address 607 14th Street, N.W.  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D1143

Date of Disbursement

/   /

Amount of Each Disbursement this Period

403.32

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

3379.55

**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 18 / 26

<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)  
DAKPAC

Full Name (Last, First, Middle Initial)

## **A.** Perkins Coie LLP

Mailing Address 607 14th Street, N.W.  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D1146

Date of Disbursement

04 / 05 / 2007

Amount of Each Disbursement this Period

253.97

Full Name (Last, First, Middle Initial)

## **B.** Perkins Coie LLP

Mailing Address 607 14th Street, N.W.  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D1154

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

880.88

Full Name (Last, First, Middle Initial)

## **C.** Perkins Coie LLP

Mailing Address 607 14th Street, N.W.  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D1153

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

549.45

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

1684.30

**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 19 / 26

<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)  
DAKPAC

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address P.O. Box 360001

City State Zip Code  
Ft. Lauderdale FL 33336

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D1134

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4004.88

Full Name (Last, First, Middle Initial)

## **B. Charlie Palmer Steak**

Mailing Address 101 Constitution Avenue, NW

City State Zip Code  
Washington DC 20001

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D1135

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4004.88

[MEMO ITEM]

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

4004.88

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

9068.73

# **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 20 / 26

<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)  
DAKPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Tim Johnson For South Dakota		<b>Transaction ID:</b> D1145 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 2 / 2 0 0 7</div> </div>
Mailing Address PO Box 1859		<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
City Sioux Falls State SD Zip Code 57101		
Purpose of Disbursement Contribution		
Candidate Name Tim Johnson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SD District:		
<b>B.</b> Full Name (Last, First, Middle Initial) Tim Johnson For South Dakota		<b>Transaction ID:</b> D1148 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 5 / 2 0 0 7</div> </div>
Mailing Address PO Box 1859		<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
City Sioux Falls State SD Zip Code 57101		
Purpose of Disbursement Contribution		
Candidate Name Tim Johnson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SD District:		
<b>C.</b> Full Name (Last, First, Middle Initial) Mark Pryor for US Senate		<b>Transaction ID:</b> D1141 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 0 7</div> </div>
Mailing Address P.O. Box 2720		<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
City Little Rock State AR Zip Code 72203		
Purpose of Disbursement Contribution		
Candidate Name Mark L. Pryor		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AR District:		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>15000.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>

# **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 21 / 26

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
DAKPAC

Full Name (Last, First, Middle Initial)

## **A. Mark Pryor for US Senate**

Mailing Address P.O. Box 2720

City Little Rock State AR Zip Code 72203

Purpose of Disbursement  
Contribution

Candidate Name  
Mark L. Pryor

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AR District:

Transaction ID: D1142

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Earl Pomeroy for Congress**

Mailing Address P.O. Box 746

City Bismarck State ND Zip Code 58502

Purpose of Disbursement  
Contribution

Candidate Name  
Earl Pomeroy

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: ND District: 01

Transaction ID: D1132

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. Earl Pomeroy for Congress**

Mailing Address P.O. Box 746

City Bismarck State ND Zip Code 58502

Purpose of Disbursement  
Contribution

Candidate Name  
Earl Pomeroy

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: ND District: 01

Transaction ID: D1137

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

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

10000.00

**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 22 / 26

<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)  
DAKPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress		<b>Transaction ID:</b> D1147 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 5 / 2 0 0 7</div> </div>
Mailing Address P.O. Box 746		<b>Amount of Each Disbursement this Period</b> <div>2500.00</div>
City Bismarck State ND Zip Code 58502		
Purpose of Disbursement Contribution		
Candidate Name Earl Pomeroy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Dick Durbin Committee		<b>Transaction ID:</b> D1149 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 5 / 2 0 0 7</div> </div>
Mailing Address PO Box 1949		<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
City Springfield State IL Zip Code 62705		
Purpose of Disbursement Contribution		
Candidate Name Richard J. Durbin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Max Baucus		<b>Transaction ID:</b> D1152 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 7</div> </div>
Mailing Address PO Box 586		<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
City Helena State MT Zip Code 59624		
Purpose of Disbursement Contribution		
Candidate Name Max Baucus		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

12500.00

**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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
DAKPAC

<b>A.</b> Full Name (Last, First, Middle Initial) North Dakota Democratic Party		<b>Transaction ID:</b> D1130 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 9 / 2 0 0 7</div> </div>	
Mailing Address 1902 East Divide Avenue		<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>	
City Bismarck	State ND		Zip Code 58501
Purpose of Disbursement 2007 Contribution			<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee		<b>Transaction ID:</b> D1136 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 7</div> </div>	
Mailing Address 120 Maryland Avenue, NE		<b>Amount of Each Disbursement this Period</b> <div>15000.00</div>	
City Washington	State DC		Zip Code 20002
Purpose of Disbursement 2007 Contribution			<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Reed Committee		<b>Transaction ID:</b> D1144 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 7</div> </div>	
Mailing Address P.O. Box 8628		<b>Amount of Each Disbursement this Period</b> <div>2500.00</div>	
City Cranston	State RI		Zip Code 02920
Purpose of Disbursement Contribution			<div>Category/Type</div>
Candidate Name Jack Reed			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: RI District:			

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

**22500.00**

**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)

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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)  
DAKPAC

<b>A. Ben for Congress</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 608 City Crompond State NY Zip Code 10517 Purpose of Disbursement Void of 6/06 Contribution Candidate Name Ben Shuldiner Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1150</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period -500.00
<b>B. Friends Of Senator Carl Levin</b> Full Name (Last, First, Middle Initial) Mailing Address 10 G Street, NE Suite 470 City Washington State DC Zip Code 20002 Purpose of Disbursement Contribution Candidate Name Carl Levin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1131</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period 2500.00
<b>C. Friends of Jay Rockefeller</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 1909 City Charleston State WV Zip Code 25327 Purpose of Disbursement Contribution Candidate Name John Davison Rockefeller, IV Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1138</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period 2500.00
<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)

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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)  
DAKPAC

A. Full Name (Last, First, Middle Initial)  
Friends of Mary Landrieu, Inc.

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name  
Mary L. Landrieu

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA District:

Transaction ID: D1139

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)  
Friends of Mary Landrieu, Inc.

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name  
Mary L. Landrieu

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District:

Transaction ID: D1140

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

10000.00

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

74500.00

# **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)

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<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

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NAME OF COMMITTEE (In Full)

DAKPAC

Full Name (Last, First, Middle Initial)

**A.** Joe Lawson For State Senate

Mailing Address 5854 106th Avenue, NE

City  
Brocket

State  
ND

Zip Code  
58321

Purpose of Disbursement  
Void of 10/06 Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D1151

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-2500.00

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

-2500.00

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

-2500.00