

**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  
 CONGRESSIONAL MAJORITY COMMITTEE

ADDRESS (number and street) **P. O. BOX 746**  
 Check if different than previously reported. (ACC) **Bakersfield CA 93302**

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00117721

3. IS THIS REPORT  NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:	April 15 Quarterly Report(Q1)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	July 15 Quarterly Report(Q2)		Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	October 15 Quarterly Report(Q3)		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
<input checked="" type="checkbox"/> January 31 Quarterly Report(YE)		(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Special (12G)	Runoff (12R)
July 31 Mid-Year Report(Non-election Year Only) (MY)			Convention (12C)			
Termination Report (TER)			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 07 01 2003 through 12 31 2003

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 ROBIN FOSTER

Signature of Treasurer Electronically Filed by ROBIN FOSTER Date 01 28 2003

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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**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
 CONGRESSIONAL MAJORITY COMMITTEE

Report Covering the Period: From: <sup>M</sup>07 <sup>D</sup>01 <sup>Y</sup>2003 To: <sup>M</sup>12 <sup>D</sup>31 <sup>Y</sup>2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2003		48322.08
(b) Cash on Hand at Beginning of Reporting Period .....	90305.80	
(c) Total Receipts (from Line 19) .....	148100.00	299263.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	238405.80	347585.08
<hr/>		
7. Total Disbursements (from Line 31) .....	151277.71	260456.99
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	87128.09	87128.09
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
<hr/>		
10. Debts and Obligations owed BY 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**

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Page 3

Write or Type Committee Name

CONGRESSIONAL MAJORITY COMMITTEE

Report Covering the Period: From: <sup>M</sup>07 <sup>-</sup>01 <sup>-</sup>2003 To: <sup>M</sup>12 <sup>-</sup>31 <sup>-</sup>2003

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	46000.00	
(ii) Unitemized .....	100.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	46100.00	139850.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	100500.00	157913.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	146600.00	297763.00
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 .....	1500.00	1500.00
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)) .....	148100.00	299263.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	148100.00	299263.00

**DETAILED SUMMARY PAGE**

of Disbursements

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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	9868.84
(b) Other Federal Operating Expenditures.....	50277.71	118588.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	50277.71	128456.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	101000.00	132000.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (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))..	151277.71	260456.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	151277.71	250588.15

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	146600.00	297763.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	146600.00	297763.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	50277.71	118588.15
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	50277.71	118588.15

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 / 47	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BART ASNER</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 12 CLAREMONT LANE		Transaction ID: SA11A1.6290
City COTO DE CAZA	State CA	Zip Code 92679
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer MONARCH HEALTH CARE	Occupation CEO	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. MARY BETH BARRETT-NEWMAN</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 3253 HARTZELL ST		Transaction ID: SA11A1.6101
City EVANSTON	State IL	Zip Code 60201
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer MULLIN CONSULTING	Occupation EXEC VP	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. PAUL F. BERLIN</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 189 E. LAKE SHORE DR UNIT 7-E		Transaction ID: SA11A1.6097
City CHICAGO	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>4500.00</b>
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 / 47	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. STANLEI BLOCK</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 222 N. LASALLE ST		Transaction ID: SA11A1.6094
City CHICAGO	State IL	Zip Code 60601-1003
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. JAMES M. CLARY</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 520 LAKE COOK RD SUITE 150		Transaction ID: SA11A1.6099
City DEERFIELD	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer MULLIN CONSULTING	Occupation PRESIDENT	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Dr. JAY J. COHEN</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 30872 COAST HWY APT 210		Transaction ID: SA11A1.6228
City LAGUNA BEACH	State CA	Zip Code 92651-6134
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer MONARCH HEALTH CARE	Occupation PRESIDENT	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3500.00</b>
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 / 47	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. EDWARD F. COTTER</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 11 LAS PALOMAS		Transaction ID: SA11A1.6208
City	State	Zip Code
ORINDA	CA	94563
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HEALTH NET INC	Occupation VP-NATIONAL MEDICARE COMPLIANCE	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. BRIAN G. ELLERMAN</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 2236 BEECHWOOD AVE		Transaction ID: SA11A1.6105
City	State	Zip Code
WILMETTE	IL	60091
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer MULLIN CONSULTING	Occupation VP	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. PATTIANN FIRMISS</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 7 QUEENS WAY		Transaction ID: SA11A1.6103
City	State	Zip Code
LINCOLNSHIRE	IL	60069
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>4500.00</b>
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 9 / 47	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. NICK FRANKLIN</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 318 SUGAR HARBOR RD		Transaction ID: SA11A1.6234
City NEWPORT BEACH	State CA	Zip Code 92663
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer PACIFICARE HEALTH SYSTEMS	Occupation SVP- PUBLIC AFFAIRS	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. SIDNEY A. FRIEDMAN</b>		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address 20 LANE OF THE ACRES		Transaction ID: SA11A1.6084
City HADDONFIELD	State NJ	Zip Code 08033-3505
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer SELF	Occupation CHARTERED FINANCIAL CONSULTANT	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. JAY M. GELLERT</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 4872 TOPANGA CANYON BLVD APT 312		Transaction ID: SA11A1.6194
City WOODLAND HILLS	State CA	Zip Code 91364
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer HEALTH NET INC	Occupation PRES/CEO	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	5000.00
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 10 / 47	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JAMES T. GRANT</b>		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address 527 TURTLE CREEK DR		Transaction ID: SA11A1.6114
City BRENTWOOD	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. LISA HAINES</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 874 HAMMOND ST #15		Transaction ID: SA11A1.6202
City WEST HOLLYWOOD	State CA	Zip Code 90069
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer HEALTH NET INC	Occupation VP-CORP COMMUNICATIONS	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. ALAN J. HUNKEN</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 20 N. CLARK SUITE 1850		Transaction ID: SA11A1.6086
City CHICAGO	State IL	Zip Code 60602
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer SELF	Occupation FINANCIAL SERVICES	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts TN's Page (optional) .....	▶	<b>2750.00</b>
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 11 / 47	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PATRICK JOHNSTON</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 2802 LAKEVIEW		Transaction ID: SA11A1.6216
City STOCKTON	State CA	Zip Code 95204
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer HEALTH NET	Occupation SR GOV'T RELATIONS CONSULTANT	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. LISA KALUSTIAN</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 15040 PLUMMER ST #109		Transaction ID: SA11A1.6200
City NORTH HILLS	State CA	Zip Code 91343
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer HEALTH NET INC	Occupation VP-PUBLIC RELATIONS	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. KATHLEEN KIES</b>		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address 6109 FRANKLIN PARK RD		Transaction ID: SA11A1.6111
City MCLEAN	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer NONE	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>2250.00</b>
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 / 47	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KARIN D. MAYHEW</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 1485 KINGSTON CIR		Transaction ID: SA11A1.6208
City	State	Zip Code
WESTLAKE VILLAGE	CA	91362-4360
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HEALTH NET INC	Occupation SVP-ORGANIZATION EFFECTIVENESS	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. BRUCE MEIER</b>		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address 487 CENTRAL PARK WEST, #8G		Transaction ID: SA11A1.6132
City	State	Zip Code
NEW YORK	NY	10025
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer ON SITE PSYCHOLOGICAL	Occupation PSYCHOLOGIST	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. RICHARD MELNICK</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 1405 BRAXTON ROAD		Transaction ID: SA11A1.6107
City	State	Zip Code
LIBERTYVILLE	IL	60048
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer CLARK CONSULTING	Occupation CONSULTING PRINCIPAL	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3500.00</b>
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 13 / 47	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADRIENNE B. MORRELL</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 907 14TH ST #2		Transaction ID: SA11A1.6204
City SANTA MONICA	State CA	Zip Code 90403
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HEALTH NET INC	Occupation GOV'T RELATIONS CONSULTANT	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. LANE R. MOYER</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 20800 N. GLEN CARRY CIRCLE		Transaction ID: SA11A1.6092
City BARRINGTON	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. JANET G. NEWPORT</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 2421 E 16TH STREET #4		Transaction ID: SA11A1.6236
City NEWPORT BEACH	State CA	Zip Code 92663-5442
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer PACIFICARE HEALTH SYSTEMS	Occupation VP-PUBLIC POLICY	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>2500.00</b>
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 14 / 47	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WILLIAM T. O'DONNELL</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 1225 SOMERSET DRIVE		Transaction ID: SA11A1.6068
City GLENVIEW	State IL	Zip Code 60025
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer WM T. O'DONNELL ASSOCIATE-S, INC.	Occupation PRES	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. DAVID W. OLSON</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 4912 PASEO DEL PAVON		Transaction ID: SA11A1.6210
City TORRANCE	State CA	Zip Code 90505-6269
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HEALTH NET INC	Occupation SVP-CORP COMMUNICATIONS	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. HOWARD G. PHANGTIEL</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 137 N. WOODBURN DR		Transaction ID: SA11A1.6232
City LOS ANGELES	State CA	Zip Code 90049
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer PACIFICARE HEALTH SYSTEMS	Occupation PRES/CEO	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3500.00</b>
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 15 / 47	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ALAN J. PIERRROT</b>		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address 2747 W. LAKE VAN NESS CIRCLE		Transaction ID: SA11A1.6116
City FRESNO	State CA	Zip Code 93711
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN G. REX-WALLER</b>		Date of Receipt M / D / Y 10 / 02 / 2003
Mailing Address 210 BROADWAY		Transaction ID: SA11A1.6112
City WILMETTE	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer NATIONAL SURGICAL HOSPITA-LS	Occupation CEO	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. MARVIN P. RICH</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 6415 MEADOWS CT		Transaction ID: SA11A1.6224
City MALIBU	State CA	Zip Code 90265
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer HEALTH NET INC	Occupation EVP-FINANCE AND OPERATIONS	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3500.00</b>
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 16 / 47	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JONATHAN H. SCHEFF</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 8450 AVENIDA CRESTA		Transaction ID: SA11A1.6218
City LA JOLLA	State CA	Zip Code 92037
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer HEALTH NET	Occupation CHIEF MEDICAL OFFICER	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. JAY L. SILVERSTEIN</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 12991 BLUE HERON CIR		Transaction ID: SA11A1.6212
City QJAJ	State CA	Zip Code 93023-9710
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HEALTH NET INC	Occupation SVP-MARKETING	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. BARTON WALD</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 1475 CHAMBERLAIN RD		Transaction ID: SA11A1.6238
City PASADENA	State CA	Zip Code 91103
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer PHYSICIANS ASSN OF GRTR SAN GABRIEL VA	Occupation PRES/CEO	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 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 17 / 47	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WARRENT. WAMBERG</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 102 S. WYNSTONE PARK DR		Transaction ID: SA11A1.6090
City	State	Zip Code
NORTH BARRINGTON	IL	60010
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer CLARK CONSULTING	Occupation CEO	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. ED WENDT</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 21271 BURBANK BLVD		Transaction ID: SA11A1.6240
City	State	Zip Code
WOODLAND HILLS	CA	91367
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HEALTH NET INC	Occupation SVP-CHIEF INFO OFFICER	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. SUE H. WESTEN</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 31 ROUNDUP RD		Transaction ID: SA11A1.6214
City	State	Zip Code
BELL CANYON	CA	91307
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer NONE	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3000.00</b>
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 18 / 47	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LETITIA WHITE</b>		Date of Receipt M / D / Y 11 / 06 / 2003
Mailing Address 139D1 PISCATAWAY DR		Transaction ID: SA11A1.6125
City State Zip Code FORT WASHINGTON MD 20744	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer COPELAND, LOWERY LAW FIRM	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. CHRIS WING</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 236 7TH ST		Transaction ID: SA11A1.6220
City State Zip Code SEAL BEACH CA 90740	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer HEALTH NET	Occupation EVP-REGIONAL HEALTH PLANS	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. JAMES E. WOYS</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 204D SPANISH BAR CT		Transaction ID: SA11A1.6228
City State Zip Code GOLD RIVER CA 95670	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2000.00
Name of Employer HEALTH NET FEDERAL SERVICES	Occupation PRESIDENT	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>4000.00</b>
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 10 / 47	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. HERMAN WRIGHT, Jr.		Date of Receipt M / D / Y 12 / 17 / 2008
Mailing Address 1110 EAST BAY SHORE DR		Transaction ID: SA11A1.6222
City	State	Zip Code
VIRGINIA BEACH	VA	23451-3869
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer HEALTH NET	Occupation EMERGING MARKETS PROGRAM OFFICER	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1000.00</b>
TOTAL This Period (last page this line number only) .....	▶	<b>46000.00</b>

**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 20 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 09 / 26 / 2003
Mailing Address 100 Abbott Park Rd. D312 AP6D		Transaction ID: SA11C.6109
City Abbott Park	State IL	Zip Code 60064
FEC ID number of contributing federal political committee. <b>C</b> C00040279		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2013.00	

Full Name (Last, First, Middle Initial) <b>B. ACCENTURE PAC</b>		Date of Receipt M / D / Y 12 / 10 / 2003
Mailing Address 800 Connecticut Ave NW SUITE 600		Transaction ID: SA11C.6180
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. <b>C</b> C00300707		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. AETNA ING POLITICAL ACTION COMMITTEE (FKA AETNA LIFE AND CASUALTY...)</b>		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 151 FARMINGTON AVENUE RWB1		Transaction ID: SA11C.6182
City HARTFORD	State CT	Zip Code 06156
FEC ID number of contributing federal political committee. <b>C</b> C00181828		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>12000.00</b>
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 21 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLAC PAC</b>		Date of Receipt M / D / Y 11 / 06 / 2003
Mailing Address 1932 WYNNNTON RD		Transaction ID: SA11C.6127
City	State	Zip Code
COLUMBUS	GA	31808
FEC ID number of contributing federal political committee. <b>C</b> C00034157		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. AKIN, GUMP, STRAUSS, HAUER &amp; FELD LLP CIVIC ACTION COMMITTEE</b>		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address 1333 NEW HAMPSHIRE AVE/NW STE 400		Transaction ID: SA11C.6138
City	State	Zip Code
WASHINGTON	DC	20036
FEC ID number of contributing federal political committee. <b>C</b> CD0104801		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 09 / 29 / 2003
Mailing Address 120 Park Avenue		Transaction ID: SA11C.6082
City	State	Zip Code
New York	NY	10017
FEC ID number of contributing federal political committee. <b>C</b> CD0089138		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>8000.00</b>
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 22 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. AMERICAN SHORT LINE AND REGIONAL RAILROAD ASSOCIATION - POLITICAL ACTION CMTE (ASLRRA)</b>		Date of Receipt M / D / Y 10 / 28 / 2003
Mailing Address 50 F STREET NW SUITE 7020		Transaction ID: SA11C.6147
City WASHINGTON	State DC	Zip Code 20001-1507
FEC ID number of contributing federal political committee. <b>C C00298190</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. BLUE SHIELD OF CALIFORNIA</b>		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 50 BEALE STREET		Transaction ID: SA11C.6248
City SAN FRANCISCO	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. <b>C C00340384</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. COOPERATIVE OF AMERICAN PHYSICIANS PAC</b>		Date of Receipt M / D / Y 10 / 24 / 2003
Mailing Address 333 S. HOPE ST., 8TH FLOOR		Transaction ID: SA11C.6148
City LOS ANGELES	State CA	Zip Code 90071
FEC ID number of contributing federal political committee. <b>C C00161604</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>4500.00</b>
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 23 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. EDISON INTERNATIONAL PAC</b>		Date of Receipt M / D / Y 11 / 24 / 2003
Mailing Address 520 S GRAND AVENUE SUITE 700		Transaction ID: SA11C.6183
City LOS ANGELES	State CA	Zip Code 90071
FEC ID number of contributing federal political committee. <b>C C00019653</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. EQUIPMENT LEASING ASSOCIATION LEASEPAC COMMITTEE</b>		Date of Receipt M / D / Y 11 / 12 / 2003
Mailing Address 4301 NORTH FAIRFAX DR #550		Transaction ID: SA11C.6180
City ARLINGTON	State VA	Zip Code 22203
FEC ID number of contributing federal political committee. <b>C CD0132282</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. FHAGPG PAC</b>		Date of Receipt M / D / Y 10 / 22 / 2003
Mailing Address 200 NORTH BROADWAY		Transaction ID: SA11C.6144
City ST LOUIS	State MO	Zip Code 63102
FEC ID number of contributing federal political committee. <b>C CD0200659</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>11000.00</b>
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 24 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 11 / 06 / 2003
Mailing Address 129B Pennsylvania Ave NW STE 1100		Transaction ID: SA11C.6129
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. <b>C</b> C00024869		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. HEALTH NET, INCORPORATED POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 12 / 17 / 2003
Mailing Address 21850 OXNARD STREET 25TH FLOOR		Transaction ID: SA11C.6242
City WOODLAND HILLS	State CA	Zip Code 91367
FEC ID number of contributing federal political committee. <b>C</b> C00230789		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. NATIONAL GOOD GOVERNMENT FUND</b>		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address 2300 First City Tower 1001 Fannin		Transaction ID: SA11C.6140
City Houston	State TX	Zip Code 77002
FEC ID number of contributing federal political committee. <b>C</b> C00032797		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>12000.00</b>
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 25 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. NORTHWEST AIRLINES POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address 5101 Northwest Drive		Transaction ID: SA11C.6133
City	State	Zip Code
St. Paul	MN	55111
FEC ID number of contributing federal political committee. <b>C</b> C00104802		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address 720 EAST WISCONSIN AVENUE ROOM 647		Transaction ID: SA11C.6137
City	State	Zip Code
MILWAUKEE	WI	53202
FEC ID number of contributing federal political committee. <b>C</b> C00197095		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. PACIFICARE HEALTH SYSTEMS INC PAG</b>		Date of Receipt M / D / Y 12 / 15 / 2003
Mailing Address M/S CY20-536 5905 Plaza Drive		Transaction ID: SA11C.6244
City	State	Zip Code
Cypress	CA	90630
FEC ID number of contributing federal political committee. <b>C</b> C00240903		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>9000.00</b>
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 26 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. PHYSICIANS FOR WOMEN'S HEALTH PAC</b>		Date of Receipt M / D / Y 10 / 15 / 2003
Mailing Address P.O. BOX 23498		Transaction ID: SA11C.6120
City	State	Zip Code
WASHINGTON	DC	20026-3498
FEC ID number of contributing federal political committee. <b>C</b> C00364158		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. PISTACHIO PAC</b>		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address 517 C STREET		Transaction ID: SA11C.6142
City	State	Zip Code
WASHINGTON	DC	20002
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. PRIGEMATERHOUSEGOOPERS POLITICAL ACTION COMMITTEE I</b>		Date of Receipt M / D / Y 10 / 31 / 2003
Mailing Address 1900 K STREET NW		Transaction ID: SA11C.6149
City	State	Zip Code
WASHINGTON	DC	20008
FEC ID number of contributing federal political committee. <b>C</b> CD0107235		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>9000.00</b>
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 27 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. REAL ESTATE INVESTMENT TRUSTS PAC</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2003
Mailing Address 1875 I ST., NW, SUITE 800		Transaction ID: SA11C.6128
City	State	Zip Code
WASHINGTON	DC	20006
FEC ID number of contributing federal political committee. <b>C</b> C00303339		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE REALPAC FKA NATIONAL REALTY PAC</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2003
Mailing Address 1420 NEW YORK AVENUE NW SUITE 1100		Transaction ID: SA11C.6130
City	State	Zip Code
WASHINGTON	DC	20006
FEC ID number of contributing federal political committee. <b>C</b> C00093779		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. REALTORS POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2003
Mailing Address 430 N MICHIGAN AVE		Transaction ID: SA11C.61B4
City	State	Zip Code
CHICAGO	IL	60611
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>12000.00</b>
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 28 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RENAL CARE GROUP PAC</b>		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address 2525 WEST END AVENUE SUITE 600		Transaction ID: SA11C.6135
City	State	Zip Code
NASHVILLE	TN	37203
FEC ID number of contributing federal political committee. <b>C</b> C00382101		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. ROBERT MONDAVI CORPORATION CIVIC ACTION COMMITTEE, THE</b>		Date of Receipt M / D / Y 10 / 14 / 2003
Mailing Address P.O. BOX 106		Transaction ID: SA11C.6118
City	State	Zip Code
OAKVILLE	CA	94562
FEC ID number of contributing federal political committee. <b>C</b> C00283259		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. SBC COMMUNICATIONS EMPAC</b>		Date of Receipt M / D / Y 09 / 29 / 2003
Mailing Address 175 E. HOUSTON ST, RM 7-A-5D		Transaction ID: SA11C.6081
City	State	Zip Code
SAN ANTONIO	TX	78205
FEC ID number of contributing federal political committee. <b>C</b> C00109D17		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

SUBTOTAL of Receipts TN's Page (optional) .....	▶	<b>7000.00</b>
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 28 / 47	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SBC COMMUNICATIONS EMPAC</b>		Date of Receipt M / D / Y 11 / 10 / 2003
Mailing Address 175 E. HOUSTON ST, RM 7-A-5D		Transaction ID: SA11C.6182
City SAN ANTONIO	State TX	Zip Code 78205
FEC ID number of contributing federal political committee. <b>C C00109017</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. USTEAM PAC</b>		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address 100 WEST PUTNAM AVE		Transaction ID: SA11C.6110
City GREENWICH	State CT	Zip Code 06830
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 12 / 08 / 2003
Mailing Address P.O. BOX 500 MS-3G		Transaction ID: SA11C.6186
City SAN ANTONIO	State TX	Zip Code 78252
FEC ID number of contributing federal political committee. <b>C C00109548</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>8000.00</b>
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 30 / 47	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WAL-MART STORES INC PAC FOR RESPONSIBLE GOVERNMENT</b>		Date of Receipt M / D / Y 12 / 09 / 2003
Mailing Address 702 SW 8TH STREET		Transaction ID: SA11C.6188
City	State	Zip Code
BENTONVILLE	AR	72716
FEC ID number of contributing federal political committee. <b>C</b> C00093054		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. WELLCHOICE POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 12 / 12 / 2003
Mailing Address 11 West 42nd Street		Transaction ID: SA11C.6246
City	State	Zip Code
New York	NY	10036
FEC ID number of contributing federal political committee. <b>C</b> C00365064		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	3000.00
TOTAL This Period (last page this line number only) .....	▶	100500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 47	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. JEFF COLYER FOR CONGRESS		Date of Receipt M / D / Y 12 / 10 / 2003
Mailing Address PD BOX 25345		Transaction ID: SA16.6189
City OVERLAND PARK	State KS	Zip Code 66225
FEC ID number of contributing federal political committee. C C00346858		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	REFUND GENERAL CONTRIBUTION, 2002
Receipt For: 2002 Primary X General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	1500.00
TOTAL This Period (last page this line number only) .....	▶	1500.00

**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 32 / 47
	<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)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Transaction ID: SB21B.6253 Date of Disbursement 11 / 03 / 2003
Mailing Address		Amount of Each Disbursement this Period  201.68
City State Zip Code		
Purpose of Disbursement FAX SVCS	Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BAKERSFIELD AIR CHARTER</b>		Transaction ID: SB21B.6251 Date of Disbursement 12 / 31 / 2003
Mailing Address 2827 HANGAR WAY		Amount of Each Disbursement this Period  1220.91
City State Zip Code BAKERSFIELD CA 09308		
Purpose of Disbursement TRAVEL	Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		Transaction ID: SB21B.6251 Date of Disbursement 10 / 29 / 2003
Mailing Address 300 FIRST ST SE		Amount of Each Disbursement this Period  1023.36
City State Zip Code WASHINGTON DC 20003		
Purpose of Disbursement CATERING	Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>2445.95</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 33 / 47			
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Citibank		Transaction ID: SB21B.6250 Date of Disbursement 07 / 09 / 2003	
Mailing Address P. O. Box 6402			
City The Lakes	State NV	Zip Code 88901	Amount of Each Disbursement this Period 4256.80
Purpose of Disbursement CATERING, TRAVEL, SOFTWARE & SUPPLIES		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Citibank		Transaction ID: SB21B.6170 Date of Disbursement 10 / 09 / 2003	
Mailing Address P. O. Box 6402			
City The Lakes	State NV	Zip Code 88901	Amount of Each Disbursement this Period 2642.45
Purpose of Disbursement TRAVEL AND SUPPLIES		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Transaction ID: SB21B.6162 Date of Disbursement 09 / 24 / 2003	
Mailing Address P. O. BOX 1140			
City MEMPHIS	State TN	Zip Code 38101	Amount of Each Disbursement this Period 18.58
Purpose of Disbursement SHIPPING		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional) .....	▶	<b>2661.03</b>
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 34 / 47	
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FEDERAL EXPRESS</b>		Transaction ID: SB21B.6171 Date of Disbursement 10 / 20 / 2003	
Mailing Address P. O. BOX 1140			
City MEMPHIS	State TN	Zip Code 38101	Amount of Each Disbursement this Period  28.05
Purpose of Disbursement SHIPPING		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>B. FEDERAL EXPRESS</b>		Transaction ID: SB21B.6172 Date of Disbursement 10 / 20 / 2003	
Mailing Address P. O. BOX 1140			
City MEMPHIS	State TN	Zip Code 38101	Amount of Each Disbursement this Period  64.43
Purpose of Disbursement SHIPPING		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>C. FEDERAL EXPRESS</b>		Transaction ID: SB21B.6176 Date of Disbursement 10 / 27 / 2003	
Mailing Address P. O. BOX 1140			
City MEMPHIS	State TN	Zip Code 38101	Amount of Each Disbursement this Period  31.25
Purpose of Disbursement SHIPPING		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>123.73</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 35 / 47

<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)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. HAUTE ON THE HILL BY RIDGEWELL'S</b>		Transaction ID: SB21B.6154 Date of Disbursement 09 / 24 / 2003
Mailing Address RHOB RM B-339B		Amount of Each Disbursement this Period  325.50
City WASHINGTON	State DC	
Zip Code 20515	Category/ Type	
Purpose of Disbursement CATERING	Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) <b>B. SOUTHWESTERN BELL</b>		Transaction ID: SB21B.6161 Date of Disbursement 09 / 10 / 2003
Mailing Address		Amount of Each Disbursement this Period  246.10
City	State	
Zip Code	Category/ Type	
Purpose of Disbursement TELEPHONE	Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) <b>C. SOUTHWESTERN BELL</b>		Transaction ID: SB21B.6175 Date of Disbursement 10 / 09 / 2003
Mailing Address		Amount of Each Disbursement this Period  288.10
City	State	
Zip Code	Category/ Type	
Purpose of Disbursement TELEPHONE	Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: District		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>860.70</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 36 / 47			
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VICTORY FUNDS INC</b>		Transaction ID: SB21B.6153 Date of Disbursement 07 / 09 / 2003	
Mailing Address 2505 STONEGATE DR N			
City BEDFORD	State TX	Zip Code 76021	Amount of Each Disbursement this Period  5000.00
Purpose of Disbursement fundraising services		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>B. VICTORY FUNDS INC</b>		Transaction ID: SB21B.6163 Date of Disbursement 08 / 22 / 2003	
Mailing Address 2505 STONEGATE DR N			
City BEDFORD	State TX	Zip Code 76021	Amount of Each Disbursement this Period  5000.00
Purpose of Disbursement FUNDRAISING SERVICES		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>C. VICTORY FUNDS INC</b>		Transaction ID: SB21B.6160 Date of Disbursement 09 / 10 / 2003	
Mailing Address 2505 STONEGATE DR N			
City BEDFORD	State TX	Zip Code 76021	Amount of Each Disbursement this Period  5000.00
Purpose of Disbursement FUNDRAISING SERVICES		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>15000.00</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 37 / 47
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VICTORY FUNDS INC</b>		Transaction ID: SB21B.6158 Date of Disbursement 09 / 24 / 2003	
Mailing Address 2505 STONEGATE DR N		Amount of Each Disbursement this Period  1442.00	
City BEDFORD	State TX		Zip Code 76021
Purpose of Disbursement TRAVEL			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>B. VICTORY FUNDS INC</b>		Transaction ID: SB21B.6173 Date of Disbursement 10 / 09 / 2003	
Mailing Address 2505 STONEGATE DR N		Amount of Each Disbursement this Period  6396.00	
City BEDFORD	State TX		Zip Code 76021
Purpose of Disbursement FUNDRAISING SERVICES			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>C. VICTORY FUNDS INC</b>		Transaction ID: SB21B.6174 Date of Disbursement 10 / 09 / 2003	
Mailing Address 2505 STONEGATE DR N		Amount of Each Disbursement this Period  5000.00	
City BEDFORD	State TX		Zip Code 76021
Purpose of Disbursement ADMINISTRATIVE FEES			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>12838.00</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 38 / 47							
	<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)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VICTORY FUNDS INC</b>		Transaction ID: SB21B.6252 Date of Disbursement 11 / 03 / 2003	
Mailing Address 2505 STONEGATE DR N		Amount of Each Disbursement this Period 5000.00	
City BEDFORD	State TX	Zip Code 76021	Category/ Type
Purpose of Disbursement ADMINISTRATIVE FEES		Candidate Name	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. VICTORY FUNDS INC</b>		Transaction ID: SB21B.6254 Date of Disbursement 12 / 06 / 2003	
Mailing Address 2505 STONEGATE DR N		Amount of Each Disbursement this Period 5000.00	
City BEDFORD	State TX	Zip Code 76021	Category/ Type
Purpose of Disbursement ADMINISTRATIVE FEES		Candidate Name	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. VICTORY FUNDS INC</b>		Transaction ID: SB21B.6255 Date of Disbursement 12 / 18 / 2003	
Mailing Address 2505 STONEGATE DR N		Amount of Each Disbursement this Period 4627.00	
City BEDFORD	State TX	Zip Code 76021	Category/ Type
Purpose of Disbursement FUNDRAISING SVCS		Candidate Name	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>14627.00</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)

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

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. WAMBERG FINANCIAL		Transaction ID: SB21B.6158 Date of Disbursement 09 / 25 / 2003	
Mailing Address 102 S. WYNSTONE PARK DRIVE		Amount of Each Disbursement this Period 1443.98	
City N. BARRINGTON	State IL	Zip Code 60010	Category/ Type
Purpose of Disbursement TRAVEL		Candidate Name	
Office Sought: House Senate President State: District	Disbursement For: 2004 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	▶	1443.98
TOTAL This Period (last page this line number only) .....	▶	50000.39

**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 40 / 47	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ALICE FORGY KERR</b>		Transaction ID: SB23.6272 Date of Disbursement 12 / 31 / 2003	
Mailing Address P.O. BOX 910988			
City LEXINGTON	State KY	Zip Code 40501	Amount of Each Disbursement this Period  5000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: KY District 6			

Full Name (Last, First, Middle Initial) <b>B. BOB BEAUPREZ FOR CONGRESS</b>		Transaction ID: SB23.6259 Date of Disbursement 12 / 31 / 2003	
Mailing Address 382 BLACK HAWK LN			
City LA FAYETTE	State CO	Zip Code 80026	Amount of Each Disbursement this Period  5000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: CO District 7			

Full Name (Last, First, Middle Initial) <b>C. BURNS FOR CONGRESS</b>		Transaction ID: SB23.6258 Date of Disbursement 12 / 31 / 2003	
Mailing Address 113 Mirns Street			
City Sylvania	State GA	Zip Code 30467	Amount of Each Disbursement this Period  5000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: GA District 12			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>15000.00</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 41 / 47			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHRIS CHOCOLA FOR CONGRESS INC</b>		Transaction ID: SB23.6267 Date of Disbursement 12 / 31 / 2003
Mailing Address PO BOX 6728		Amount of Each Disbursement this Period  5000.00
City SOUTH BEND	State IN Zip Code 46600	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: IN District: D2		

Full Name (Last, First, Middle Initial) <b>B. DAN LUNGREN FOR CONGRESS</b>		Transaction ID: SB23.6279 Date of Disbursement 12 / 31 / 2003
Mailing Address 285 IRONPOINT RD		Amount of Each Disbursement this Period  5000.00
City FOLSOM	State CA Zip Code 05630	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: CA District: 3		

Full Name (Last, First, Middle Initial) <b>C. ERNEST FLETCHER FOR GOVERNOR</b>		Transaction ID: SB23.6177 Date of Disbursement 10 / 29 / 2003
Mailing Address P.O. BOX 910504		Amount of Each Disbursement this Period  1000.00
City LEXINGTON	State KY Zip Code 40501	
Purpose of Disbursement CONTRIBUTION		
Candidate Name ERNEST FLETCHER FOR GOVERNOR		
Office Sought: House Senate President	Disbursement For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
State: KY District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>▶</b>	<b>11000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>▶</b>	

**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 42 / 47	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. GEOFF DAVIS FOR CONGRESS</b>		Transaction ID: SB23.6274 Date of Disbursement 12 / 31 / 2003
Mailing Address 3161 Dixie Highway Suite F		Amount of Each Disbursement this Period  5000.00
City Erlanger	State KY Zip Code 41018	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: KY District: D4		

Full Name (Last, First, Middle Initial) <b>B. GLENN, DYLAN C</b>		Transaction ID: SB23.6276 Date of Disbursement 12 / 31 / 2003
Mailing Address PO BOX 128		Amount of Each Disbursement this Period  5000.00
City CUSSETA	State GA Zip Code 31805	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: GA District: D2		

Full Name (Last, First, Middle Initial) <b>C. GRAVES FOR CONGRESS</b>		Transaction ID: SB23.6282 Date of Disbursement 12 / 31 / 2003
Mailing Address 110 SOUTH 10TH STREET		Amount of Each Disbursement this Period  5000.00
City TARKIO	State MO Zip Code 64491	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: MO District: D6		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>15000.00</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 43 / 47	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. HALEY BARBOUR FOR GOVERNOR</b>		Transaction ID: SB23.6178 Date of Disbursement 10 / 29 / 2003
Mailing Address P.O. BOX 1499		Amount of Each Disbursement this Period  5000.00
City YAZOO CITY	State MS Zip Code 39194	
Purpose of Disbursement CONTRIBUTION		
Candidate Name HALEY BARBOUR FOR GOVERNOR		
Office Sought: House Senate President	Disbursement For: 2004 Primary X General Other (specify) ▼	Category/ Type
State: MS District		

Full Name (Last, First, Middle Initial) <b>B. HAYES FOR CONGRESS</b>		Transaction ID: SB23.6284 Date of Disbursement 12 / 31 / 2003
Mailing Address PO BOX 2000		Amount of Each Disbursement this Period  5000.00
City CONCORD	State NC Zip Code 28026	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: X House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Category/ Type
State: NC District 08		

Full Name (Last, First, Middle Initial) <b>C. HEATHER WILSON FOR CONGRESS</b>		Transaction ID: SB23.6285 Date of Disbursement 12 / 31 / 2003
Mailing Address P.O. BOX 14070 P.O. BOX 14070		Amount of Each Disbursement this Period  5000.00
City ALBUQUERQUE	State NM Zip Code 87191	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: X House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	Category/ Type
State: NM District 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>15000.00</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 44 / 47	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JIM GERLACH FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.6289 Date of Disbursement 12 / 31 / 2003	
Mailing Address 911 WELSH AYRES WAY		Amount of Each Disbursement this Period  5000.00	
City DOWNTOWN	State PA		Zip Code 19335
Purpose of Disbursement CONTRIBUTION			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House Senate President State: PA District D6	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. JON PORTER FOR CONGRESS</b>		Transaction ID: SB23.6288 Date of Disbursement 12 / 31 / 2003	
Mailing Address 8917 Stafford Springs Dr		Amount of Each Disbursement this Period  5000.00	
City Las Vegas	State NV		Zip Code 89134
Purpose of Disbursement CONTRIBUTION			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House Senate President State: NV District D3	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MIKE ROGERS FOR CONGRESS</b>		Transaction ID: SB23.6286 Date of Disbursement 12 / 31 / 2003	
Mailing Address 1304 QUINTARD AVENUE		Amount of Each Disbursement this Period  5000.00	
City ANNISTON	State AL		Zip Code 36201
Purpose of Disbursement CONTRIBUTION			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House Senate President State: AL District D3	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>15000.00</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 45 / 47	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MISSISSIPPI REPUBLICAN PARTY</b>		Transaction ID: SB23.6168 Date of Disbursement 10 / 23 / 2003
Mailing Address P. O. Box 60 PO BOX 60		Amount of Each Disbursement this Period  5000.00
City Jackson	State MS Zip Code 39205	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) <b>B. NORTHUP, ANNE MEAGHER</b>		Transaction ID: SB23.6281 Date of Disbursement 12 / 31 / 2003
Mailing Address 3340 LEXINGTON ROAD		Amount of Each Disbursement this Period  5000.00
City LOUISVILLE	State KY Zip Code 40206	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: X House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	
State: KY District 03		

Full Name (Last, First, Middle Initial) <b>C. RENZI FOR CONGRESS</b>		Transaction ID: SB23.6256 Date of Disbursement 12 / 31 / 2003
Mailing Address P.O. Box 219		Amount of Each Disbursement this Period  5000.00
City Flagstaff	State AZ Zip Code 86002	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: X House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	
State: AZ District 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>15000.00</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 46 / 47	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SHELLEY MOORE CAPITO FOR CONGRESS</b>		Transaction ID: SB23.6271 Date of Disbursement 12 / 31 / 2003
Mailing Address PO BOX 11519		Amount of Each Disbursement this Period  5000.00
City CHARLESTON	State WV Zip Code 25339	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: WV District: D2		

Full Name (Last, First, Middle Initial) <b>B. SIMMONS FOR CONGRESS</b>		Transaction ID: SB23.6280 Date of Disbursement 12 / 31 / 2003
Mailing Address P.O. BOX 268, DRAWER 271		Amount of Each Disbursement this Period  5000.00
City STONINGTON	State CT Zip Code 06378	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: CT District: D2		

Full Name (Last, First, Middle Initial) <b>C. TIM MURPHY FOR CONGRESS</b>		Transaction ID: SB23.6270 Date of Disbursement 12 / 31 / 2003
Mailing Address PO BOX 11721		Amount of Each Disbursement this Period  5000.00
City PITTSBURGH	State PA Zip Code 15228	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: PA District: 18		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>15000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>101000.00</b>

