

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

White Mountain PAC

ADDRESS (number and street) P.O. Box 1772

Check if different than previously reported. (ACC)

Concord NH 03302 1772

2. **FEC IDENTIFICATION NUMBER** C00370932

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

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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12G)
- Runoff (12R)

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 04 01 2008 through 06 30 2008

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

Type or Print Name of Treasurer H. Scott Flegal

Signature of Treasurer Electronically Filed by H. Scott Flegal Date 02 06 2009

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

Office Use Only											FEC FORM 3X (Rev. 12/2004)
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
White Mountain PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		80363.95
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	64760.79									
(c) Total Receipts (from Line 19)	15500.00	18500.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	80260.79	98863.95								
7. Total Disbursements (from Line 31)	20289.10	38892.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	59971.69	59971.69								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
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**

Write or Type Committee Name
White Mountain PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	1000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	1000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	15500.00	17500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15500.00	18500.00
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))	15500.00	18500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15500.00	18500.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	3541.95	5095.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3541.95	5095.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	29000.00
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.....	2747.15	4797.15
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))..	20289.10	38892.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20289.10	38892.26

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	15500.00	18500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15500.00	18500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3541.95	5095.11
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3541.95	5095.11

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
White Mountain PAC

A. Full Name (Last, First, Middle Initial)
BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)

Mailing Address 1300 North 17th Street
Suite 1400

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2008

Transaction ID: SA11C.6313

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION STATE AND FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1100 N. King St. DE5-001-02-07
DE5-001-02-07

City State Zip Code
Wilmington DE 19884

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
04 / 14 / 2008

Transaction ID: SA11C.6309

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
FMR Corp. PAC

Mailing Address 82 Devonshire Street

City State Zip Code
Boston MA 02109

FEC ID number of contributing federal political committee. **C** C00215046

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2008

Transaction ID: SA11C.6314

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **12500.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
White Mountain PAC

A. Full Name (Last, First, Middle Initial)
NATIONAL MARINE MANUFACTURERS ASSOCIATION'S BOAT POLITICAL ACTION COMMITTEE

Mailing Address 444 North Capitol Street N.W.
Suite 645

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00245548

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: SA11C.6311

Amount of Each Receipt this Period
2000.00

Contribution

B. Full Name (Last, First, Middle Initial)
THERMO FISHER SCIENTIFIC INC. PAC

Mailing Address 81 Wyman Street
PO Box 9046

City State Zip Code
Waltham MA 02454

FEC ID number of contributing federal political committee. **C** C00292318

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2008

Transaction ID: SA11C.6310

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 3000.00

TOTAL This Period (last page this line number only) ► 15500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 15721 City Wilmington State DE Zip Code 19886-5721 Purpose of Disbursement Credit Card Payment (see Memo) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6316 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 8 Amount of Each Disbursement this Period 158.75 003 Category/ Type
B.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 15721 City Wilmington State DE Zip Code 19886-5721 Purpose of Disbursement Credit Card Payment (see Memo) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6319 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8 Amount of Each Disbursement this Period 109.95 003 Category/ Type
C.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 15721 City Wilmington State DE Zip Code 19886-5721 Purpose of Disbursement Credit Card Payment (see Memo) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6322 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 8 Amount of Each Disbursement this Period 3273.25 003 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3541.95

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bricco</p> <p>Mailing Address 241 Hanover St</p> <p>City Boston State MA Zip Code 02113</p> <p>Purpose of Disbursement Political Lunch</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6320</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 109.95</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) The Cranberry Bog</p> <p>Mailing Address 29 Lafayette Road</p> <p>City North Hampton State NH Zip Code 03862</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6318</p> <p>Date of Disbursement 03 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 158.75</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) The Maids</p> <p>Mailing Address 62 1/2 Lafayette Rd</p> <p>City North Hampton State NH Zip Code 03862</p> <p>Purpose of Disbursement Cleaning Service Political Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6329</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 369.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 10 / 16

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

A.	Full Name (Last, First, Middle Initial) The White Apron		Transaction ID: SB21B.6332	
	Mailing Address 1465 Hooksett Rd		Date of Disbursement 05 / 30 / 2008	
	City Hooksett	State NH	Zip Code 03106	Amount of Each Disbursement this Period 2904.25
	Purpose of Disbursement Catering Service		003	[MEMO ITEM]
	Candidate Name		Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State:	District:		

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	3541.95

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

<p>A. Full Name (Last, First, Middle Initial) JOHANNNS FOR SENATE INCORPORATED</p> <p>Mailing Address 1201 O STREET SUITE 101</p> <p>City LINCOLN State NE Zip Code 68506</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6338 Date of Disbursement 05 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMITTEE '08</p> <p>Mailing Address PO BOX 1496</p> <p>City LOUISVILLE State KY Zip Code 40201</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6333 Date of Disbursement 04 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMITTEE '08</p> <p>Mailing Address PO BOX 1496</p> <p>City LOUISVILLE State KY Zip Code 40201</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6335 Date of Disbursement 04 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 16

<input 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)
White Mountain PAC

A.	Full Name (Last, First, Middle Initial) OGONOWSKI FOR SENATE		Transaction ID: SB23.6336	
	Mailing Address 228 S WASHINGTON STREET SUITE 115		Date of Disbursement 05 / 07 / 2008	
	City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution		011	
	Candidate Name		Category/ Type	
	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: MA	District: 00		

SUBTOTAL of Disbursements This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	14000.00

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
White Mountain PAC

A. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address PO Box 15721 <hr/> City Wilmington State DE Zip Code 19886-5721 <hr/> Purpose of Disbursement Account Analysis Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6345 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 15.70
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address PO Box 15721 <hr/> City Wilmington State DE Zip Code 19886-5721 <hr/> Purpose of Disbursement Account Analysis Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6346 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 15.03
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Belknap County Republican Committee <hr/> Mailing Address 2 Greystone Place <hr/> City Laconia State NH Zip Code 03246 <hr/> Purpose of Disbursement Lincoln Day Dinner Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6350 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 100.00
	Category/ Type 012
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

130.73

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
White Mountain PAC

A.	Full Name (Last, First, Middle Initial) Cheshire County Republican Committee	Transaction ID: SB29.6349 Date of Disbursement																			
	Mailing Address Attn: Julianna Bergeron 191 Washington St	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	4		2	0	0	8												
	City Keene State NH Zip Code 03431	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Lincoln Day Dinner	<table border="1"><tr><td>100.00</td></tr></table>	100.00																		
100.00																					
	Candidate Name	<table border="1"><tr><td>012</td></tr></table> Category/Type	012																		
012																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Derry Republican Committee	Transaction ID: SB29.6356 Date of Disbursement																			
	Mailing Address c/o Mr. Chris Wolfe 5 Martha Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	8		2	0	0	8												
	City Derry State NH Zip Code 03038	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Flegal Law Office, PA	Transaction ID: SB29.6340 Date of Disbursement																			
	Mailing Address 159 Main Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	8												
	City Nashua State NH Zip Code 03060	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Administrative Expense	<table border="1"><tr><td>458.42</td></tr></table>	458.42																		
458.42																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1058.42</td></tr></table>	1058.42
1058.42		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
White Mountain PAC

A.	Full Name (Last, First, Middle Initial) Friends of Bob Letourneau	Transaction ID: SB29.6357 Date of Disbursement 06 / 20 / 2008
	Mailing Address 30 South Avenue	
	City Derry State NH Zip Code 03038	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name	012 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: SB29.6341 Date of Disbursement 05 / 23 / 2008
	Mailing Address 12 Louden Rd	
	City Concord State NH Zip Code 03302	Amount of Each Disbursement this Period 58.00
	Purpose of Disbursement Annual Rental Fee Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Reams for County Attorney	Transaction ID: SB29.6351 Date of Disbursement 05 / 09 / 2008
	Mailing Address P.O. Box 372	
	City Hampton State NH Zip Code 03843	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1058.00
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 16 / 16

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

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NAME OF COMMITTEE (In Full)
White Mountain PAC

A.

Full Name (Last, First, Middle Initial)
Stephen Stepanek for Executive Council

Transaction ID: SB29.6352

Date of Disbursement

Mailing Address 1 Colonel Wilkins Road

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	0	8

City Amherst State NH Zip Code 03031

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

2747.15
